



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II

EDISON, NEW JERSEY 08837

MAY 20 1993

CERTIFIED MAIL--
RETURN RECEIPT REQUESTED

See Attached List of Addressees

Re: Frontier Chemical Superfund Site
4626 Royal Avenue, Niagara Falls, Niagara County, New York

Dear Sir/Madam:

The U.S. Environmental Protection Agency ("EPA") is charged with responding to the release or threatened release of hazardous substances, pollutants and contaminants into the environment and with enforcement responsibilities under the Comprehensive Environmental Response, Compensation and Liability Act ("CERCLA"), 42 U.S.C. §§ 9601, et seq.

EPA has documented the release and threatened release of hazardous substances into the environment at a site referred to herein as the Frontier Chemical Superfund Site (the "Frontier Site" or the "Site"), a former waste processing/management facility located in Niagara Falls, Niagara County, New York. In response to these releases of hazardous substances and the threat of future such releases, EPA has spent public funds and anticipates spending additional public funds pursuant to CERCLA.

Under CERCLA and other laws, responsible parties may be held liable for monies expended by the federal government in taking response actions at and around sites where hazardous substances have been released, including investigative, planning, removal, remedial and enforcement actions. Responsible parties also may be subject to orders requiring them to take response actions themselves.

Responsible parties under CERCLA include current and past owners or operators of a facility, persons who arranged for the treatment or disposal of hazardous substances which came to be disposed at a facility, and persons who accepted hazardous substances for transport to disposal or treatment facilities or sites selected by such persons.

264458



By this letter, we notify you that we have reason to believe that your company is a potentially responsible party ("PRP") within the meaning of Section 107(a) of CERCLA, 42 U.S.C. §9607(a), with respect to the Site. The attached list of addressees of this letter represents the list of the PRPs identified by EPA with respect to the Site to date.

Thus far, the response activities that EPA has taken with respect to the Site include, among other things, establishing 24-hour Site security; maintaining boilers that supply steam to the steam tracer lines, process lines and heat to the drum storage buildings; maintaining compressors which are essential to the fire control system on-site; pumping storm waters from containment areas through the on-site carbon absorption system and into storage tanks, pending approval for discharge; performing regularly scheduled inspections to examine the structural integrity of drums and tanks; and overpacking leaking drums. In addition, EPA has segregated and inventoried all laboratory sized containers at the Site, has returned compressed gas cylinders to their manufacturers, and sent empty drums off-site to a drum recycler. We intend to take or require the PRPs to take additional response activities at the Site. Those activities include, among other things, disposal of the numerous drums, drum contents and other waste materials now present at the Site, at an EPA-approved treatment or disposal facility. We expect these response actions to be conducted under a phased approach. The tasks that we presently expect to be included in the initial phase (hereinafter, "Phase 1") are described in the enclosed draft administrative consent order under Section 106(a) of CERCLA. EPA's current estimate of the cost of the response activities outlined in the enclosed draft order is \$4,705,896.31.

We expect the subsequent phase(s) of response activities at the Site to include such tasks as the removal of bulk waste materials found in tanks at the Site and a soils and groundwater investigation. We anticipate such subsequent work to be the subject of a future letter to the PRPs, and presently expect it to be addressed under a separate administrative order(s).

We wish to determine whether you are willing to perform or fund the response activities outlined in the enclosed draft consent order. Should you not volunteer to perform or fund the work, EPA will proceed with the work itself (the costs of which you may be liable for under Section 107(a) of CERCLA) or EPA may require you to perform the work pursuant to a unilateral administrative order issued under Section 106(a) of CERCLA.

Please notify EPA in writing within twenty-eight (28) calendar days of your receipt of this letter as to whether you are prepared to perform or fund the response activities described in the enclosed draft consent order. Given the large number of PRPs for the Site, we urge the recipients of this letter to form a Steering Committee which would serve as a contact between EPA and the PRPs. The recipients of this letter may either respond to

the letter individually or through a representative of the Steering Committee. If you do not provide a written response to this letter, either individually or through the Steering Committee, within 28 days of your receipt of this letter, we will assume that you decline to perform or participate in the Phase 1 response activities.

Assuming that some or all of the PRPs are willing to perform the work described in the enclosed draft consent order, any negotiations regarding the terms of the consent order will need to be completed within fifty (50) calendar days of your receipt of this letter.

In order to facilitate settlement discussions, we have prepared and enclosed herewith a draft list (hereinafter, the "Waste-In List") of the generators of the drums of waste currently at the Site. Please note that this Waste-In List only reflects the drums at the Site; it does not cover other waste materials at the Site, including the approximately 344,000 gallons of liquids in tanks at the Site.

EPA has established an administrative record file for the Site. The administrative record file is available for your review at the following locations during regular business hours:

1. United States Environmental Protection Agency
Region II
2890 Woodbridge Avenue, Bldg. 205
Edison, NJ 08837
Contact: Frank Evans or Lisa Schweizer
(908) 906-6980
2. United States Environmental Protection Agency
Public Information Office
345 Third Street, Suite 530
Niagara Falls, NY 14303
Contact: Mike Basile (716) 285-8842
3. Niagara Falls Public Library
1425 Main Street
Niagara Falls, NY 14303
(716) 286-4881

EPA also wishes to determine whether you are willing to reimburse the agency for the response costs it has incurred in connection with the Site. As of April 7, 1993, the EPA costs appearing in EPA's Integrated Financial Management System, regarding the Frontier Chemical Site, total at least \$376,121.30. These costs are broken down as follows:

Emergency Response
Cleanup Service
(ERCS) Contractor (ETI) \$330,975.95

Technical Assistance
Team (TAT) Contractor 208.25
(Roy F. Weston)

EPA Payroll 17,076.28

EPA Indirect Costs 22,652.50

EPA Travel Expenses 5,208.32

TOTAL (as of 4/7/93) \$376,121.30

In accordance with Section 107(a) of CERCLA, 42 U.S.C. §9607(a), interest on the \$376,121.30 will begin to accrue as of the date of this letter. The costs incurred by EPA with respect to the Site are charged to the Hazardous Substance Superfund, established pursuant to 26 U.S.C. §9507 and administered by EPA. As PRPs, you are potentially liable for EPA's costs, plus interest.

Pursuant to Section 107(a) of CERCLA, EPA hereby requests that you make restitution in the amount of \$376,121.30, together with any additional response costs incurred and/or documented by EPA with respect to the Site, plus any and all interest recoverable under Section 107 or under any other provision of law. The draft Order enclosed with this letter provides for the PRPs' reimbursement of, inter alia, EPA's past costs.

Please note that EPA is incurring additional response costs with respect to the Site on an ongoing basis, and expects to continue to incur response costs at the Site in the future. In accordance with Section 107(a) of CERCLA, interest on such additional costs shall accrue from the date of expenditure.

Within twenty-eight (28) days of your receipt of this letter, please notify EPA unambiguously as to whether you wish to make such restitution to EPA. (You may provide such notification to EPA either individually or through the Steering Committee that is formed by the PRPs.) If you do not notify EPA within that period that you are prepared to make such restitution, EPA will conclude that you do not wish to reimburse EPA for its past costs, and may commence preparations for civil litigation against you.

Your response to this letter should be sent to Mr. Kevin Matheis, Emergency and Remedial Response Division, Removal Action Branch, U.S. Environmental Protection Agency, Edison Field Facility, 2890 Woodbridge Avenue, Building 209 (MS-211) Edison, New Jersey 08837, with a copy to Elena Kissel, Esq., Office of Regional Counsel, U.S. Environmental Protection Agency, Region II, 26 Federal Plaza, Room 437, New York, NY 10278.

This notice letter is not being provided pursuant to the special notice procedures outlined in Section 122(e) of CERCLA, 42 U.S.C. §9622(e). Use of those procedures here and the moratorium that those procedures entail would be inappropriate in light of the imminent and substantial endangerment posed by conditions at the Site and the need for prompt performance of the planned response activities.

Please feel free to contact Kevin Matheis or Elena Kissel by calling the Frontier Chemical information line at (716) 284-5405 on weekdays between the hours of 9:00am - 3:00pm if you have any questions concerning this matter.

Thank you for your prompt attention to this matter.

Sincerely yours,

Richard Salter
George Pavlou, Acting Director
Emergency and Remedial Response Division

Enclosures

cc: Michael O'Toole - NYSDEC (w/out enclosure)
Jeffrey Lacey, Esq.- NYSDEC (w/out enclosure)

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FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal	5gal	30gal	55gal		
21ST CENTURY ENVELOPE	026	UNKNOWN								26	1430	1430
A.B. CHANCE	031	D002,7								31	1705	1705
ABB AIR PREHEATER, INC.	008	UNKNOWN								8	440	440
ABB KENT-TAYLOR	012	D008,39,40/F001								12	660	660
ABB TRACTION, INC.	025	D007								25	1375	1375
ACF SHIPPERS CARLINE	011	D001/F003,5								11	605	605
ACINI CORP.	039	UNKNOWN								39	2145	2145
ADCHEM CORP.	006	D001/F003,5								6	330	330
ADCO PRODUCTS	002	0001,2							1	1	85	85
ADMIRAL FOLDING BOX	006	D001/F003,5								6	330	330
ADVANCE ABSORBER PRODUCTS	002	D001/U223	2.....									10
AEI INDUSTRIES #1	003	D001								3	165	165
AEROQUIP CORP.	004	D002,7								4	220	220
AGC CORP. (PS)	001	D001								1	55	55
AGWAY ENERGY	007	D002								7	385	385
AIRLINE PETROLEUM	001	D001,18								1	55	55
AIRTEL PRODUCTS	001	UNKNOWN								1	55	55
ALLEGHENY CO-DEPT OF L	001	D002/U134	.....1.....									20
ALLENTOWN CEMENT CO., INC.	028	UNKNOWN								28	1540	1540
ALLIANCE TOOL DIVISION	002	D001/F003								2	110	110
ALLIED SINTERINGS	001							1			5	5
ALPINE PRESS	004	D001,7,8/F003,5								4	220	220
AMERICAN AIRLINES	002	D001/F002								2	110	110
AMBESCO	001	D002								1	55	55
AMHUESER BUSCH	001	D002								1	55	55
ANITEC INTL PAPER INKG	031	UNKNOWN								31	1705	1705
APOLLO METALS INC.	002	F003/D001								2	110	110
APS INC.	007	D002						1		6	335	335
ARIES AUTOMOTIVE OF SOMERS	004	D001								4	220	220
ARMSTRONG WORLD INDUSTRIES	010	UNKNOWN								10	550	550
ARVIN CALSPAN CORP.	001	F003/D001								1	55	55
ATHENIA WIRE	004	D002								4	220	220

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					TOT GAL	DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal		5gal	30gal	55gal		
ATLANTIC FABRICATORS	002	D001									2	110	110
ATLANTIC MARKETING TER	001	D001,18									1	55	55
ATLANTIC REFINING (A)	002	D001,18									2	110	110
ATLANTIC REFINING (B)	001	D001,18									1	55	55
ATLANTIC REFINING (C)	001	D001,18									1	55	55
ATLANTIC REFINING (D)	001	D001,18									1	55	55
ATLANTIC REFINING (E)	001	D001,18									1	55	55
ATLANTIC SINTERED METALS	001	D002,3									1	55	55
ATLAS TUBE	001	UNKNOWN									1	55	55
ATTICA CORRECTIONAL FCLTY	005	D001/F003									5	275	275
B & B GREENBERG CO.	009	D002									9	495	495
BAILEY MANUFACTURING	005	UNKNOWN									5	275	275
BALLETHAKERS, INC.	005	F003,5/D001,35									5	275	275
BARRE ENGRAVING CO.	004	UNKNOWN									4	220	220
BARNET LITHO, INC.	004	UNKNOWN									4	220	220
BATTERY ENGINEERING, INC.	002	D002							1		1	55	60
BELOIT MANHATTAN	003	UNKNOWN									1	55	165
BLIEM STEEL	001	UNKNOWN									1	55	55
BLUE CHIP PRODUCTS, INC.	004	D001/F003									4	220	220
BLUE GRASS CHEMICAL SP	038	D002,6,7,8									38	2090	2090
BOSTON COACH	003	UNKNOWN									3	165	165
BRIDON AMERICA CORP.	013	UNKNOWN									13	715	715
BRIGHT STAR INDUSTRY	006	D001									6	330	330
BROAD COVE TRUST	001	D001,8									1	55	55
BRUNSWICK TIMES RECORD	007	D005,6,7									7	385	385
BUCKEYE PIPELINE	006	D001,18									6	330	330
BUCKHAM TRANSPORT LTD	004	UNKNOWN									4	220	220
BUCKNER OIL SERVICE INC	004	UNKNOWN									4	220	220
BUFFALO COLOR CORP.	010	D001/U012									10	550	550
BUFFALO FREE TRADE COMPLEX	006	D001									6	330	330
BURROUGH HALL	002	UNKNOWN									2	110	110
BUS INDUSTRIES OF AMERICA	012	D001,3/F001,3									12	660	660

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Drum Volume List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal	5gal	30gal	55gal		
C.R.BARD CATHETER & INSTRUMENT	071	D001,35/F003,5						2		69	3855	3855
CARBO THERM	002	F003								2	110	110
CASE HOYT CORPORATION	025	D001,39,40/F005								25	1375	1375
CCL CUSTOM MANUFACTURING	015	D001								15	825	825
CENTRAL INDUSTRIAL LABS (PS)	001	D006/F007								1	55	55
CHALLENGE MFG	001	UNKNOWN								1	55	55
CHAMPION PRODUCTS	039	D001/F002,3,5						1		38	2120	2120
CHARM GRAPHICS INC.	002	D001/F003								2	110	110
CHEMCLENE CORPORATION	028	D001,18/F001,3								28	1540	1540
CHEMICAL LEAMAN TANK LINE	002	012,052								2	110	110
CHEMICAL PROCESS & SPLY	005	D002								5	275	275
CHESTER HOIST	003	D001								3	165	165
CHILDSSTORE FIXTURE CO.	011	F003,5								11	605	605
CHROMATIC PAINT	001	UNKNOWN								1	55	55
CHROMIUM CORPORATION	096	D002,7								96	5280	5280
CITY OF SYRACUSE-DPW	001	D001								1	55	55
CITY PUMP & TANK	003	D001,18								3	165	165
CLARK GRAVE VAULT	004	D002,7								4	220	220
CODO MFG.	001	UNKNOWN								1	55	55
COMFORT DESIGN, INC.	008	F003,5/D001								8	440	440
COMMANDER NOTBY	048	UNKNOWN								48	2640	2640
COMMUNITY MEDICAL CENTER	001	D001	1.....				5					5
CONRAIL	001	D008,18								1	55	55
CONSTRUCTION SPECIALTIES	005	F001,5								5	275	275
CORELL STEEL	052	D001/F001,2,3,5								52	2860	2860
CORSON MFG. CO.,INC	005	D001/F002								5	275	275
CREATIVE PRINTING	002	D001,39,40								2	110	110
CREST FOAM	054	D001,2,3/U019,194,223						44		10	770	770
CRETEVAULT CORP.	001	UNKNOWN								1	55	55
CROWN METRO	001	D002								1	55	55
CSMS NATIONAL GUARD	001	D002,8								1	55	55
CUSTOM DESIGN SERVICES	012	D002,7								12	660	660

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Drum Volume List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal	5gal	30gal	55gal		
CYCLE CHEM, INC.	009	F003,5								9	495	495
CYCLOTHERM	002	D011								2	110	110
D.C. AUTOMOTIVE	003	UNKNOWN								3	165	165
DANA CORPORATION	003	UNKNOWN								3	165	165
DARNORTH COMPANY	007	D001								7	385	385
DE STEFANO	003	F003/D001								3	165	165
DEGRAFF MEMORIAL HOSPITAL	001	D001								1	55	55
DELEVAN INDUSTRIES	001	UNKNOWN								1	55	55
DELMONTE CORPORATION	006	F005/D001/U220						2		4	230	230
DELTA RUBBER CO.	013	U012						13			65	65
DELVECCHIO TRANSPORT	002	D001	2.....				10					10
DENNISON OIL CO.	001	UNKNOWN								1	55	55
DIAMOND EAST LABORATORY	019	D001								19	1045	1045
DONLEE TECHNOLOGY INC	001	F001/D002,7								1	55	55
DONSCO, INC.	001	D001,35								1	55	55
DRESSER MFG. DIVISION	026	D001								26	1430	1430
DUNCAN GALVANIZING CORP	002	D002,6,7,8								2	110	110
DUNKIRK RADIATOR CORP.	002	D001								2	110	110
DURIRON CO. INC	004	F005/D001								4	220	220
DYNAMIC HYDROBLASTING	008	D002								8	440	440
EASTERN COLOR & CHEMICAL	001	UNKNOWN								1	55	55
EASTERN CONSOLIDATED AND DIST.	001	D018								1	55	55
EASTERN ELEC APPARATUS	003	UNKNOWN								3	165	165
EASTERN INDUSTRIES	005	UNKNOWN								5	275	275
EATON CORP.	014	D002								14	770	770
EGGERS INDUSTRIES	003	F003,5/D001								3	165	165
ETHEL BERGERS	001	F002,5/D018								1	55	55
ELCO CORPORATION	011	D001,2,6,8/F001								11	605	605
ELECTRIC MATERIALS CO.	003	D002,8								3	165	165
EM CORP.	005	D001,8/F005								5	275	275
ENERGY N. NATURAL GAS	001	D001	1.....				5					5
ENVIRONMENTAL DEPOT (PS)	002	UNKNOWN								2	110	110

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal	5gal	30gal	55gal		
ENVIRONMENTAL WASTE MGMT	030	D001-5,7-9,11/U122,154,188,219	16			11	3				575	575
EPICURE PRODUCTS, INC.	005	UNKNOWN								5	275	275
ERIE COUNTY WATER AUTH.	001	UNKNOWN								1	55	55
ERIE INSURANCE GROUP	004	D002					3			1	55	220
ERIE PLASTICS	001	D002								1	55	55
ETI TANK CLEANING SERV	001	F003,5								1	55	55
EUREKA SECURITY PRINTING	023	UNKNOWN								23	1265	1265
FAMILY MUTUAL BANK	001	D001,18								1	55	55
FANCHER FURNITURE	003	F003,5/D001,3,5								3	165	165
FERRO CORPORATION (VESUVIUS)	002	D002								2	110	110
FIRE DOOR CORP.	002	F003,5						1		1	60	60
FISHER INDUSTRIAL SVCE INC.	012	D002,6,7								12	660	660
FISHER PRICE TOYS	015	D001								15	825	825
FLACH INDUSTRIES	004	D001/F003								4	220	220
FLINT INK	050	D001								50	2750	2750
FOAMEX PRODUCTS, INC.	001	F002								1	55	55
FORMS, INC.	008	D001								8	440	440
POSECO, INC.	006	D001,7								6	330	330
FRAMINGHAM WELDING	001	F003,5								1	55	55
FRANK ELECTRIC CORP.	002	F003,5								2	110	110
FRICK CO.	001	F003/D001								1	55	55
FRUEHAUF CORP.	005	D001,11								5	275	275
FUJITECH	001	UNKNOWN								1	55	55
FULLER CO.	004	D001,35						1		3	170	170
G.W. LISK CO., INC.	001	F008/D003,6								1	55	55
GARDENWAY MFG	002	D002								2	110	110
GEIGER INTERNATIONAL	008	D001								8	440	440
GEM CHEM, INC.	063	UNKNOWN								63	3465	3465
GENERAL CHEMICAL CORP.	015	D006,7,8,39,40/F001,2								15	825	825
GENERAL SERVICES ADMIN	001	D002								1	55	55
GENESEE HOSPITAL	021	D001,9/F003/P105/U021,34,135	2	4	1	1	1			12	660	815
GENTEX CORPORATION	002	D022								2	110	110

**FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK**

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS				TOT GAL	DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal		55gal	5gal	30gal			55gal
GEOCHEM (PS)	001	D001	.....1.....				30					30
GEORGE INDUSTRIES	002	UNKNOWN								2	110	110
GICHNER MOBILE SYSTEMS	011	D001,2,8								11	605	605
GIDDINGS & LEWIS	027	D002,5,10,30,32,33/F003						20-gal,	1	25	1425	1425
GILBERT & BENNETT	001	D002								1	55	55
GILBERT/COMMONWEALTH, INC.	012	UNKNOWN								12	660	660
GLEDHILL RD MACHINE CO.	004	F005/D001								4	220	220
GOLD MEDAL LADDER	015	UNKNOWN								15	825	825
GOOD SAMARITAN HOSPITAL	001	D009/U151	1.....				5					5
GORDON PUBLICATIONS, INC.	020	F002,3,5								20	1100	1100
GOURO NELSON	001	UNKNOWN								1	55	55
GRAND HAVEN FURNITURE	007	D001								7	385	385
GSI-ALLIED SINTERINGS	001	D001								1	55	55
GTE SYLVANIA	001	D002	.....1....				55					55
H.B. IVES	012	F003,5/D001,3,5,8								12	660	660
HANDY & HARMAN TUBE CO.	010	F001,3,5								10	550	550
HASKELL OF PITTSBURGH	001	F003/D001								1	55	55
HAYDEN ENVIRONMENTAL	029	D001,2,7,9,11/F003,5								29	1595	1595
HEDSTROM CORPORATION	106	D001,7/F003								106	5830	5830
HENRY L. HINCKLEY CO.	001	D001/F003								1	55	55
HESS & CLARK, INC.	001	UNKNOWN								1	55	55
HOLBEN GRAPHICS	030	D001,5,11,39,40/U228								30	1650	1650
HONEY COMB SYSTEMS, INC	001	F003,5	1.....				5					5
HOWARDS EXPRESS	001	D001,18								1	55	55
HUB FOLDING BOX CO., INC	018	D001								18	990	990
HUNTINGDON ANALYTICAL SVC	002	F002,3/D001								2	110	110
HUTCHINSON HOUSEHOLD (PS)	001	U036								1	55	55
HYDROSAMPLE DIVISION (PS)	001	D001,4,5,6,7								1	55	55
ICI AMERICAS	029	D002								29	1595	1595
II, VI, INC.	007	D002,10								7	385	385
IMAGING & SENSING TECHNOLOGY	004	D001,2,5,7/F003								4	220	220
IMO INDUSTRIES	001	D007								1	55	55

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					TOT GAL	DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal		5gal	30gal	55gal		
INDEPENDANT CABLE CO.	006	UNKNOWN									6	330	330
INDUSTRIAL COATING	003	D007									3	165	165
INDUSTRIAL VACUUM SERV.	001	D001									1	55	55
INGERSOL-RAND CO.	001	D002									1	55	55
INTERGRAPHICS TECH, INC	003	D001									3	165	165
INTERMARK FLOCK CORP (A) (PS)	002	UNKNOWN									2	110	110
INTERMARK FLOCK CORP (B) (PS)	001	UNKNOWN									1	55	55
INTERNATIONAL PAPER CO	004	UNKNOWN									4	220	220
INX INTERNATIONAL/MIDLAND COLOR	042	D001									42	2310	2310
ITT HIGBIE	004	D001									4	220	220
J & D AUTOMOTIVE	003	D001,18									3	165	165
J.B. SLEVIN CO. INC.	006	D001									6	330	330
JAMESTOWN ELECTROPLATING WORKS	004	D002,3,6,8/F006,8									4	220	220
JESSUP DOOR CO.	003	D001									3	165	165
JOHN H. WILBANKS	009	UNKNOWN									9	495	495
K-WART #7171	015	UNKNOWN									15	825	825
KCR TECHNOLOGY	004	D001	.....1.....				3.....					185	185
KEENEY MANUFACTURING CO.	002	D006,7,8									2	110	110
KEM PLAYING CARDS	011	D001									11	605	605
KENMORE TON. UNION FRE	002	D008,39									2	110	110
KENSINGTON INDUSTRIES	001	D002									1	55	55
KEYES FIBRE CO.	019	D002,3,4,5,7,8,9,11/U222/P012	13.....						6		180	245	
KEYSTONE CARBON CO.	001	D002									1	55	55
KIVORT STEEL INC	005	D002/F002									5	275	275
KNOX SEMICONDUCTOR	001	D002									1	55	55
KOA SPEER ELECTRONICS, INC	002	F002									2	110	110
KWIK FILL	002	D001,18									2	110	110
LADESCO, INC.	001	F003,5									1	55	55
LANKENAU HOSPITAL	006	D001,2/U003	1.....				2.....				3	165	230
LANNETT CO., INC.	001	D008	.....1.....									20	20
LAPP INSULATORS	046	D001,3,8,11,39,40/F002,3									46	2530	2530

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					TOT GAL	DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal		5gal	30gal	55gal		
LAVALLEY BUILDING SUPPLY	001	D002									1	55	55
LAWRENCEVILLE FIRST AI	001	D001,18									1	55	55
LEDGENERE LAND CORP. (PS)	001	U036									1	55	55
LEJEUNE STEEL CO.	011	D001/F005									11	605	605
LELAND ELECTRO SYSTEMS	001	D001									1	55	55
LEVITON MANUFACTURING	001	UNKNOWN									1	55	55
LEWIS CORP.	004	D001/F003,5									4	220	220
LEYBOLD	003	D002							2		1	65	65
LG INDUSTRIES	002	F003,5									2	110	110
LIBRALTER PLASTICS	001	D001									1	55	55
LLOYD MFG. CO.	002	UNKNOWN									2	110	110
LOEWENGART & CO., INC.	004	D001,2,7,8/F003,5									4	220	220
LOOST COMPANY, INC.	001	UNKNOWN									1	110	110
LORAL DEFENSE SYSTEMS	034	D001,2,3,6,7,36/F007,8/U239	3.....	1.....	2.....	9...590					19	1045	1635
LUCERNE PRODUCTS	001	UNKNOWN									1	55	55
LUMINITE PRODUCTS CORP.	006	UNKNOWN									6	330	330
LYN CONTRACTING CO.	001	D002/F003,5									1	55	55
LYONS TRANSPORTATION	001	F003,5									1	55	55
MAINE YANKEE ATOMIC POWER	003	D001,2,7,9	1.....	.....	.....	5			1		1	60	60
MARCOR OF NEW YORK	003	UNKNOWN									3	165	165
MARKEI CORPORATION	009	UNKNOWN									9	495	495
MARSEL MIRROR & GLASS PR	001	D002,7									1	55	55
MARTEC PLASTICS	025	D001/F003,5									25	1375	1375
MARY BENSON	016	D001,6,8,10,33,40,18/U056,226	4.....	1.....	2.....	70			1		8	445	515
MASLAND INDUSTRIES	002	D001,2,3	1.....	.....	.....	5					1	55	60
MASS. PANK DISPOSAL	010	UNKNOWN									10	550	550
MASTERS CORP.	003	F003,5									3	165	165
MATTATUCK MFG (TELEFLEX)	002	D002									2	110	110
MAXPACK	002	UNKNOWN									2	110	110
MCCANN MFG.	004	F002									4	220	220
MCKAY PRESS, INC.	010	UNKNOWN									10	550	550
MEAD CORP.	006	D002,7/F003,5									6	330	330

NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					TOT GAL	DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal		5gal	30gal	55gal		
MED. DISPOSAL SVC (NAT. MED. WASTE)	007	D002/U188	1.....			4.....	1...180				1	55	235
MENTHOLATUM COMPANY	007	U188									7	385	385
MEMORIAL HOSPITAL	002	39326	2.....				10						10
MERCHANTS BANK	001	UNKNOWN									1	55	55
MERCURY AIRCRAFT INC.	003	F003,5									3	165	165
MERCY HOSPITAL	010	D001,2,3,9/P116/U162	2.....				2...120				6	330	450
MERIDIAN PRODUCTS	007	F003,5/D001,35									7	385	385
METAL FINISHING TECH.	002	D002,6,7,8									2	110	110
METALADE, INC.	003	D002,7/F002									3	165	165
METROLAND PRINTING	042	UNKNOWN									42	2310	2310
MICHIGAN LIMESTONE	012	UNKNOWN									12	660	660
MICHIGAN MAPLE BLOCK CO.	003	UNKNOWN									3	165	165
MICROSS DIV OF PIERCE CO.	005	F003/D001									5	275	275
MILCO INDUSTRIES	001	UNKNOWN									1	55	55
MISSISSIPPI CHEMICAL EXPRESS	001	U165									1	55	55
MOBIL OIL CORP.	001	D001,18									1	55	55
MONARCH CORTLAND	016	D001									16	880	880
MONEY	035	F007/D003									35	1925	1925
MONTGOMERY WIRE CO.	001	D001,5,11	1.....				5						5
MONTROSE AREA HIGH SCH	028	D001,2,4,6,8,9,22/P010/U151,223	20.....			4.....	220				4	220	440
MOOG CONTROLS	020	UNKNOWN									20	1100	1100
MORGAN GUARANTEE TRUST	006	UNKNOWN				6.....	180						180
MORGAN MATROC	002	UNKNOWN									2	110	110
MORRILL PRESS	009	F003,5/D001									9	495	495
MURRAY RECON, INC.	006	F005/D001									6	330	330
NAS WILLOW GROVE	015	D001,18,35							2		13	775	775
NATIONAL FUEL GAS CORP.	014	D001,18									14	770	770
NATIONAL METAL FINISHING CO.	008	D002									8	440	440
NATIONAL SEA PRODUCTS	002	UNKNOWN	1.....				5	1				5	10
NATIONWIDE CIRCUITS	004	D002									4	220	220
NATURE'S BOUNTY INC.	003	UNKNOWN									3	165	165

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Drum Volume List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					TOT GAL	DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal		5gal	30gal	55gal		
NAUGATUCK GLASS CO.	003	D001,39,40/F003									3	165	165
NELSON ESPENSCHIED (PS)	003	D004,D008,D009,U060,U061,U129									3	165	165
NIAGARA TRANSFORMER CORP.	002	F003/D001									2	110	110
NINE MILE POINT STATION 2	003	D001							3				15
NORTH SHORE LABS INC.	001	F005/D001									1	55	55
NORTHEAST GRAPHICS, INC.	002	F003,5									2	110	110
NORTHLAND REFRIGERATION	001	D002/F001									1	55	55
NY DEPT.OF TRANSPORT	002	D001,18									2	110	110
NY SUSQUEHANNA & WESTE	003	D001,18									3	165	165
O'LEARY PAINT CO.	003	UNKNOWN									3	165	165
OATEY CO.	009	F003,5/D001									9	495	495
OCKER & TRAP	010	D001,6,8,10,18									10	550	550
ODELL CO.	001	F003,5									1	55	55
OFCO INC.	001	D002/F001									1	55	55
OLEAN ADVANCED PRODUCT	006	D001									6	330	330
OMYA INC.-MARBLE SHOP (PS)	001	D002									1	55	55
ONTARIO ENGINEERED SUSPENSION	006	UNKNOWN									6	330	330
OWENS ILLINOIS NEG-TV	008	D001,2,5,7,8/P010,11/U080,134	.....	3	.....	3	.....	2	.....	260			260
OXFORD INNOVATIONS	006	UNKNOWN									6	330	330
P & WC AIRCRAFT SERVICES	001	UNKNOWN									1	55	55
P.A.T. PRODUCTS	001	UNKNOWN									1	55	55
PALMYRA BOAT YARD	019	D001,18									19	1045	1045
PANNIER CORPORATION	001	D002									1	55	55
PAPER CONVERSION INC.	018	D005									18	990	990
PASSAIC ENGRAVING CO., INC.	009	D002,7									9	495	495
PAUL B. ZIMMERMAN	024	UNKNOWN									24	1320	1320
PEASE A.F.B.	001	D002									1	55	55
PEERLESS WINSMITH, INC.	011	D001,3/F011									11	605	605
PENN TANK	078	UNKNOWN									78	4290	4290
PERRIOGRAPHICS	003	D001									3	165	165
PETROLEUM FUEL & TERMI	002	UNKNOWN									2	110	110
PHIL'S SERVICE STATION	002	D001									2	110	110

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					TOT GAL	DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal		5gal	30gal	55gal		
PHILADELPHIA RESINS	001	F003/D001									1	55	55
PIONEER PLASTICS	001	U147/D003							1			5	5
PLAINVILLE ELECTROPLATING CO.	001	D002,7									1	55	55
PLASTIGLIDE MFG. CORP.	009	D001,2/F001,3									9	495	495
PLATING FOR ELECTRONICS INC.	002	F009/D002,11									2	110	110
PLY GEMS	013	D002									13	715	715
POLLUTION SOLUTIONS	026	D002,4,5-11,13/F001,2,7/U036,122									26	1430	1430
POLYMERICS, INC.	014	U244									14	770	770
POLYMYX	002	D001									2	110	110
POLYPLATING, INC.	002	UNKNOWN									2	110	110
POTTSTOWN HOSPITAL	001	D009	1.....					5					5
POWEREX, INC.	010	D001,6,18/F001,3									10	550	550
PRATT & WHITNEY	021	D001,2,11/F001,2									21	1155	1155
PRESTOLITE OF NY, INC.	013	D001,2,7,8,40/F002,3,5									13	715	715
PRINT WORKS	001	D002									1	55	55
PRINTCO	008	D001									8	440	440
PROTECTIVE CLOSURES CO., INC.	007	D001/F003									7	385	385
PUROLATOR PRODUCTS	026	D001,5,6									26	1430	1430
QUIN-T CORP.	004	F003,5									4	220	220
R & A LEATHER FINISH CO.	008	F003,5									8	440	440
R.E. CHAPIN MANUFACTURING	001	UNKNOWN									1	55	55
RALSTON PURINA	004	D002							3		1	145	145
RAMAPO-CATSKILL LIBRARY SYSTEM	001	D001									1	55	55
READING REHAB. HOSPITAL	002	D002									2	110	110
REALTY ENGINEERING CO.	001	D002									1	55	55
RELIABLE METAL FINISHING	008	D002,7,8									8	440	440
REMLEY & COMPANY	013	D001,11									13	715	715
RENN'S SERVICE STATION	001	D001,8,18									1	55	55
RENOID INC.	003	D001									3	165	165
RETAIL PRINTING CORP.	005	UNKNOWN									5	275	275
RIVERDALE COLOR	008	UNKNOWN									8	440	440
ROBERT BOND BUILDERS	002	D001									2	110	110

NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					TOT GAL	DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal		5gal	30gal	55gal		
ROBERTS MEAT PACKING CORP.	006	D001,2,8,18							3	3	255	255	
ROBOTRON	002	D001/F002,3								2	110	110	
RSA SPECIALTY CHEMICAL	003	F003,5/D001								3	165	165	
RTI	004	F007/D003								4	220	220	
RYDER TRUCK RENTAL	008	UNKNOWN								8	440	440	
S.E.MORRIS COUNTY MUNI	021	F001,2								21	1155	1155	
SAEGERTOWN MFG. CORP.	001	UNKNOWN								1	55	55	
SCANSFORMS, INC.	037	UNKNOWN								37	2035	2035	
SCHWEIZER AIRCRAFT CORP	011	D001,2,6-9,18,23,27,32/F001,5								11	605	605	
SCRANTON SEWER AUTHORITY	001	D007,9								1	55	55	
SEBAGO, INC.	002	D001								2	110	110	
SELECT-TRON INDUSTRIES	003	D001,2								3	165	165	
SERONO BAKER DIAGNOSTIC	003	F027/D037	3.....					15				15	
SHEPARD NILES	007	D001,18								7	385	385	
SID HARVEY'S	001	F003/D001								1	55	55	
SIER BATH DECK GEAR	003	F007/D003								3	165	165	
SIHI PUMP	007	UNKNOWN								7	385	385	
SIMMONDS PRECISION ENGINE SYS	024	D001,2,7,8/F002	1.....					20..1105		3	165	1270	
SIMON LTI	009	D007								9	495	495	
SONOCO	002	UNKNOWN								2	110	110	
SONOCO FIBRE DRUM	003	UNKNOWN								3	165	165	
SPECIALIZED PLATING	008	UNKNOWN								8	440	440	
ST.JOHSNBURY TRUCKING	006	D001,2,8	.....					1....55		5	275	330
STATURE MACHINE TECHNOLOGY	011	UNKNOWN							10	1	355	355	
STEVENS ANALYTICAL LABS	005	D002/F001,2,3							4	1	175	175	
STOCKBRIDGE AUTO BODY	005	F005/D001								5	275	275	
STONER, INC.	007	D001,35/F003,5								7	385	385	
STRUKTOL CO. OF AMERICA	004	UNKNOWN							one 20-gallon,	3	185	185	
SUGARBUSH GOLF COURSE (PS)	001	U036								1	55	55	
SUN REFINING AND MARKETING (A)	002	D001,18								2	110	110	
SUN REFINING AND MARKETING (B)	001	UNKNOWN								1	55	55	
SUN REFINING AND MARKETING (C)	001	UNKNOWN								1	55	55	

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					TOT GAL	DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal		5gal	30gal	55gal		
SURFINCO INC.	003	F003,5/D001									3	165	165
SWANSON PLATING	006	D002,7									6	330	330
TARKETT, INC.	055	D001,2,39/F001,2,3									55	3025	3025
TECH SYSTEMS	005	D001									5	275	275
TECHNICAL COATINGS	003	U220,159/D039									3	165	165
TEKNOR APEX	020	UNKNOWN							1		19	1050	1050
TELEDYNE MCKAY	014	D001,2/F003									14	770	770
THE DINGLEY PRESS	013	F003									13	715	715
THE ELECTRIC MATERIALS CO.	001	UNKNOWN	1.....					5					5
THE GLOBE NEWSPAPER CO.	006	UNKNOWN									6	330	330
THE HENRY HINCKLEY CO.	002	F003,5/D001,35									2	110	110
THE PLASTEK GROUP	022	D001/F003									22	1210	1210
THERMATRU CORP.	039	UNKNOWN									39	2145	2145
THREE DIMENSIONAL CORP.	005	D001,2,22									5	275	275
TIBBETS INDUSTRY	001	UNKNOWN									1	55	55
TIGHE BOND CORPORATION (PS)	001	D002									1	55	55
TIVOLY, U.S.A.	011	D005									11	605	605
TNT & ASSOCIATES	008	D001									8	440	440
TODCO CORP	003	D001/F005									3	165	165
TOWN OF N. TONAWANDA	001	D008,18,29									1	55	55
TRANS TECH ELECTRONICS	001	F001									1	55	55
TRENCH COMPANY, INC.	016	D001,7,8/F003,5									16	880	880
TRI CAN SYSTEMS	001	F003/D001									1	55	55
TRICO PRODUCTS	006	UNKNOWN									6	330	330
TRIFARI KRUSMAN EISCHEL, INC	001	F007/D003									1	55	55
TRUCK-LITE CO., INC.	016	F003,5/D001									16	880	880
TURSACK PRINTING	006	UNKNOWN									6	330	330
UNIFIRST	001	D039									1	55	55
UNITED LITHOGRAPH	001	UNKNOWN									1	55	55
UNITED PANEL, INC.	002	F001,22									2	110	110
UNITED REFINING CO,PA (KWIKFILL)	002	D001,18									2	110	110

FRONTIER CHEMICAL
NIAGARA FALLS, NEW YORK

Volumetric List

GENERATOR	NO. OF DRUMS	EPA WASTE CODES	LABPACKS					DRUMS			TOT GAL	TOTAL VOLUME (Lab Packs + Drums)
			5gal	10gal	20gal	30gal	55gal	5gal	30gal	55gal		
UNIVERSAL PRECISION	008	D001								8	440	440
US DEPT. OF ENERGY	050	D001,2,5,7,8,18/F001-5/U002,56	7.....			10.....	7...720			26	1430	2150
US GENERAL SERVICES ADMIN (PS)	001	UNKNOWN						1		55		55
US TSUBAKI, INC.	001	UNKNOWN						1		55		55
VAC AERO, INC	009	F009/D002,3						9		495		495
VENDORS FIRST CHOICE	001	F003,5						1		55		55
VERNE CORPORATION	002	D001						2		110		110
VIBROPLATING	013	F006						13		715		715
VILLAGE OF WESTFIELD	001	D001						1		55		55
VINCENZA GOLD OF AMERICA (PS)	001	D002,3						1		55		55
WALLENPACK N. ELEM SCHOOL	004	D002,3/P098	.....			2.....	60	2		110		170
WATERVLIET ARSENAL	010	D001,2,7/F003,5/U159,239						10		550		550
WCA HOSPITAL	001	D001,18						1		55		55
WEBASTO SUNROOF, INC.	009	F003/D001						9		495		495
WESTBORO FIELD HDQTRS (PS)	001	U122						1		55		55
WESTERN MAINE GRAPHICS	002	UNKNOWN						2		110		110
WESTINGHOUSE ELECTRIC CORP	072	D001,2,8,35/F001,3	2.....				10	70		3850		3860
WEYERHAUSER CO.	002	UNKNOWN						2		110		110
WHITEHALL LUMBER CO	006	UNKNOWN						6		330		330
WILKESBARRE CITIZENS	002	D002						2		110		110
WILSON GREATBATCH LTD	001	D002						1		55		55
WILSON INSTRUMENTS	011	D002,7						11		605		605
WOLF PRINTING	002	UNKNOWN						2		110		110
XERKES CORPORATION	005	D001						5		275		275
YORK RAKES	001	F003/D001						1		55		55
UNKNOWN (DS-9)	003	39838 DR# 40,43,44	.....			3...	165					165
UNKNOWN (DS-9)	004	39839 DR# 41,42,45,46	.....			4...	220					220
UNKNOWN (DS-9)	003	39326 DR# 10,8,18	3.....				15					15

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

A.B. CHANCE
210 N. ALLEN STREET
CENTRALIA

MO

65240

P278592078

of Service:

Registered

☐ Insured

Certified

☐ COD

Express Mail

☐ Return Receipt
for Merchandise

Signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

PA 78592099

ABB AIR PREHEATER, INC.

PO BOX 392

WELLSVILLE

NY

14895

of Service:

Registered

☐ Insured

Certified

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

ELMIRA N.Y. 149 05/24/93 17:20
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ABB KENT-TAYLOR
PO BOX 20550
ROCHESTER

NY 14603

4. Article Number

P278592100

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

M. D. Dyer

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery .. (Extra charge)

3. Article Addressed to:

4. Article Number

0278592101

of Service:

Registered

☐ Insured

Certified

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

Signature of Agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

0.1

MIR N.Y. 149 05-13-93 20:19

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

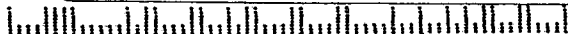
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ACF SHIPPERS CARLINE
YOCUM ROAD
MILTON

PA 17847

4. Article Number

P278592902

Service:

er

☐ Insured

ed

☐ COD

s Mail

☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/25/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address: (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ACIMI CORP
7-33 AMSTERDAM ST
NEWARK

NJ 07105

Service:

- ☐ Insured
☐ COD
Mail ☐ Return Receipt for Merchandise

In signature of addressee

or agent and DATE-DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

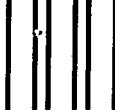
X

7. Date of Delivery

5-25-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ADCHEM CORP.
625 MAIN STREET
WESTBURY

NY 11590

4. Article Number

1912
P278592104
513
service:

- ☐ Insured
☐ COD
Mail ☐ Return Receipt
for Merchandise

Main signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Jo Ann Slade*

6. Signature — Agent

X

7. Date of Delivery

5/24

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ADCO PRODUCTS
4401 PAGE AVENUE
MICHIGAN CENTER

MI 48254

4. Article Number

1 13
P278592905

Service:

ered

☐ Insured

ed

☐ COD

s Mail

☐ Return Receipt
for Merchandise

tain signature of addressee

and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

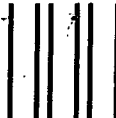
X

7. Date of Delivery

5-24-52

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

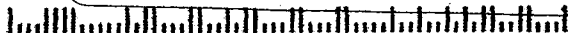
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ADMIRAL FOLDING BOX
102 PLEASANT VALLEY
METHUEN

MA 01844

Service:

- Registered ☐ Insured
Express ☐ COD
Special Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Signature (if requested and if required by law)

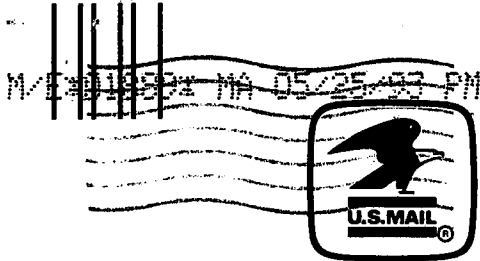
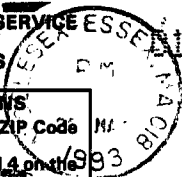


UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

AEP INDUSTRIES #1
20 KNICKERBOCKER
MOONACHIE

NJ 07074

4. Article Number

P278591916

Service:

- red ☐ Insured
d ☐ COD
Mail ☐ Return Receipt
for Merchandise

Main signature of addressee

Signature and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

APR 11 1989

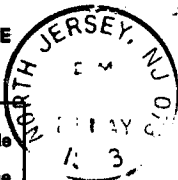
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

AEROQUIP CORP.
222 WEST MAIN ST.
VAN WERT

OH 45891

4. Article Number

0278591917

Service:

ed

☐ Insured

☐ COD

Mail

☐ Return Receipt
for Merchandise

Signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

Lori Eversole

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



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Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

AGC CURP (PS)
106 EVANSVILLE ST
MERIDEN

CT 06450

4. Article Number

0278591918

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

of agent and DATE DELIVERED.

5. Signature — Addressee

X *Thomas J. Jundt*

6. Signature — Agent

X

7. Date of Delivery

5/24/93 *RP*

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



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Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

AGWAY ENERGY
ON THE GREEN VERBANK
VERBANK NY

12585

4. Article Number

0278591919

Service:

ed

☐ Insured

☐ COD

Mail

☐ Return Receipt
for Merchandise

ain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-25-93

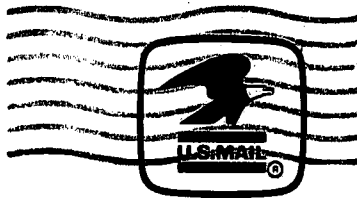
8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



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Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

AIROIL PRODUCTS
69 WESLEY ST
S. HACKENSACK

NJ 07606

Services

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

5/25/93

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

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- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

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Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

AIRLINE PETROLEUM
PO BOX 187, WINOLA RD
CLARKS SUMMIT PA 18411

0278591920

Service:

Registered

☐ Insured

Delivered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X Linda Jenkins

6. Signature — Agent

X

7. Date of Delivery

5-24-83

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

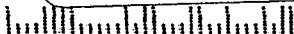
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

ALLEGHENY CO-DEPT OF L
10 COUNTY OFFICE BLDG
PITTSBURGH PA 15219

P278591922

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and **DATE DELIVERED.**

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

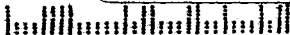
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ALLIANCE TOOL DIVISION
400 TRABOLD RD
ROCHESTER NY 14624

4. Article Number

P28591924

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee

or agent and **DATE DELIVERED.**

5. Signature — Addressee

X *J. Marino*

6. Signature — Agent

X

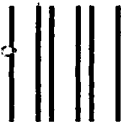
7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

400 Trabold Rd

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired; and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ALLIED SINTERINGS
29 BRIARIDGE RD
DANBURY

CT 06810

4. Article Number

P278591905

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X P. M. Unelase

6. Signature — Agent

X

7. Date of Delivery

5.21.93 BIAON

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

AMERICAN AIRLINES
HANCOCK AIRPORT
N. SYRACUSE

NY 13212

4. Article Number

0278591927

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

AMRESO
30175 SOLON INDUSTRIAL PK
SOLON OH 44139

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

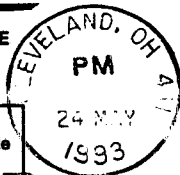
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS related on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

ANAREN MICROWAVE, INC
CORPORATE HEADQUARTERS
E. SYRACUSSE NY 13057

P 353 158 184

Service Type

Insured

☐ Insured

Registered

☐ COD

Special Mail

☐ Return Receipt for Merchandise

Signature of Delivery

5-21-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

SYR NY 132 1993 PM #5

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ANHUESER BUSCH
2970 BELGIUM RD
BALDWINVILLE

NY 13027

4. Article Number

0278591929

Service

ered

ed

ss Mail

☐ Insured

☐ COD

☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

May 24, 1993

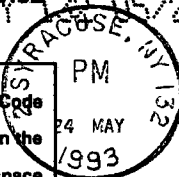
8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



CONQUER
MULTIPLE
SCLEROSIS



PENALTY FOR PRIVATE
USE, \$300

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ANITEC INTL PAPER IMAG
40 CHARLES ST
BINGHAMTON NY 13902

4. Article Number

P278591930

Service:

- Registered ☐ Insured
Certified ☐ COD
Special Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

Signature of agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (*ONLY if requested and fee paid*)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

05/24/93 PM 8:10 NY 133

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

APS INC
7600 TYLER BLVD
MENTOR

OH 44060

P278591932

Service:

- Registered ☐ Insured
Registered ☐ COD
Express Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

R APEX
N AVE
CKET

RI 02862

4. Article Number

POTI 550110

Type of Service:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt
for Merchandise |

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature - Addressee

X

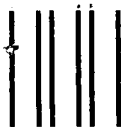
6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (*ONLY if
requested and fee paid*)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

APOLLO METALS INC
1001 14TH AVE.
BETHLEHEM

PA 18018

4. Article Number

P278591931

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

5/24/82

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



LUB DC 180 05/24/93



PENALTY FOR PRIVATE
USE, \$300

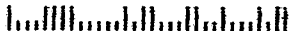
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

ARIES AUTOMOTIVE OF SOMERS
RT 12, RT 100
SOMERS NY 10587

0278591933

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☒

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature of Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address: (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ARMSTRONG WORLD INDUSTRIES
RTE. 441, PO BOX 169
MARIETTA PA 17547

0278591934

Service:

Registered



Insured

Registered



COD

Registered Mail



Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-14-93

8. Addressee's Address (ONLY if requested and fee paid)

TV

UNITED STATES POSTAL SERVICE

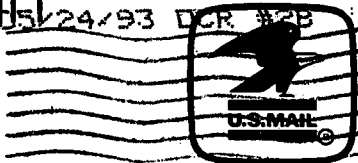
OFFICIAL BUSINESS

LANCASTER PA (175) 05/24/93 DEC 28

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**

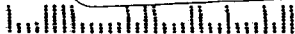


Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

1 000



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ARVIN CALSPAN CORP.
GENESEE ST
BUFFALO

NY 14225

02878591935

Service: ☒ Registered

☐ Insured

☐ COD

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

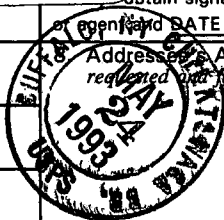
X

6. Signature — Agent

X

7. Date of Delivery

Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: 4. Article Number ⁴⁰
P278591938

ATLANTIC REFINING (A)
540 PORTLAND AVE
ROCHESTER NY 14621

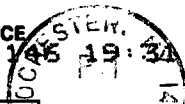
Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

tain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X
6. Signature — Agent
X *Richard L...*
7. Date of Delivery
5/22/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



05/24/93 #2

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

ATLANTIC REFINING (B)
828 RIDGE RD W.
WEBSTER NY 14580

P278591938

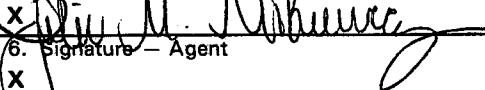
Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X 

6. Signature — Agent

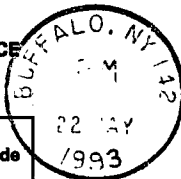
X 

7. Date of Delivery

5/12/2013

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge)
2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ATLANTIC REFINING (C)
3930 DEWEY AVE
ROCHESTER NY 14621

4. Article Number

P278591941

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X Amy Beutner

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

ATLANTIC REFINING (D)
2272 CULVER RD
ROCHESTER NY 14609

4. Article Number

P278591942

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

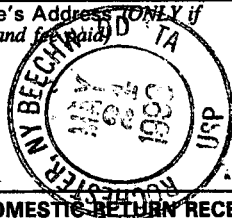
6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address ONLY if
requested and fee paid



RDC NY 146 16:22 05/25/93 #3

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

NY
1992



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ATLANTIC REFINING (E)
NORTH AND EAST AVE
CALDONIA NY 14423

P278 591943

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address (ONLY if requested and fee paid)

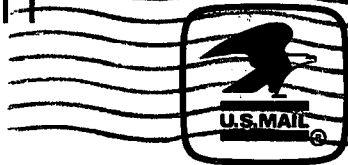
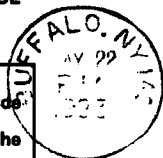
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ATTICA CORRECTIONAL FCITY
EXCHANGE STREET
ATTICA NY 14011

P278591946

Service:

ered

☐ Insured

ed.

☐ COD

s Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

B & B GREENBERG CO.
333 W. RIVER ST
PROVIDENCE

RI 02904

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X Rita L. Laflamme

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address: 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

BAILEY MANUFACTURING
BENNETT STATE ROAD
FORESTVILLE

NY

14062

P.O. Box 356

P278591948

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (*ONLY if
requested and fee paid*)

05-24-93

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

BALLETMAKERS, INC
788 BLOOMFIELD AVE
CLIFTON

NJ 07012

P278591949

Service:

Registered

☐ Insured

Express

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and **DATE DELIVERED:**

5. Signature Addressee

X

6. Signature — Agent

X

8. Addressee's Address (ONLY if requested and fee paid)

7. Date of Delivery

5/24/93

MAY 24 1993

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

BARNET LITHO, INC.
307 N. COMBUR AVE
JOHNSTOWN

NY 12095

P278591951

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-83

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

122 PM 05/24/93 ODR#12

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

42

BARRE ENGRAVING CO.
322 N. PENNA AVE
WILKES BARRE

PA 18702

4. Article Number

P278591950

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE-DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

APR 24 1993

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

BATTERY ENGINEERING, INC
1636 HYDE PARK AVE
HYDE PARK

MA 02136

P278591592

Service:

- ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5/24/83
BOSTON, MASS.
MAY 24 1983
HYDE PARK

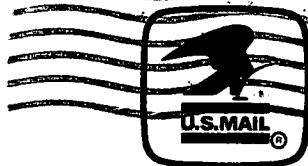
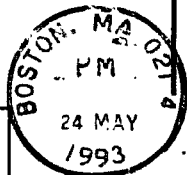
8. Addressee's Address (ONLY if requested and fee paid)

**UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS**

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

BELOIT MANHATTAN
PO BOX 157
CLARK SUMMIT

PA 18411

4. Article Number

P278591953

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED. 5/24/93

5. Signature — Addressee

X

6. Signature — Agent

Jeffrey A. Sanders

7. Date of Delivery

5.24

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



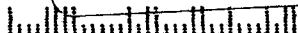
**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

BLIEM STEEL
1500 COINING DR
TOLEDO

OH 43612

0278591954

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (*ONLY if
requested and fee paid*)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER:

- Complete items 1 and/or 2 for additional services.,
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BLILEY ELECTRIC
2545 W. GRANDVIEW BLVD.
ERIE PA 16512

4a. Article Number

P353 158 185

Service Type

Registered

☐ Insured

and

☐ COD

Special Mail

☐ Return Receipt for Merchandise

Restricted Delivery

520-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Judith Mistretta

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

BLUE CHIP PRODUCTS, INC
1 NEWBOLD RD
FAIRLESS HILLS PA 19030

0278591955

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *D. J. Sorman*

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2, when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

BLUE GRASS CHEMICAL SP
895 INDUSTRIALS BLVD.
NEW ALBANY IN 47150

4. Article Number

P278591956

Service:

- erred ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

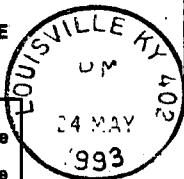
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

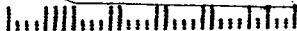
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

BOSTON COACH
1 AIRFORCE ROAD
EVERETT

MA 02149

P278591957

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

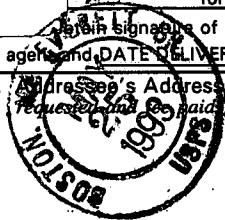
X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



ed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

P353 158 186

BRAINERD MANUFACTURING CO.
115 N. WASHINGTON STREET
E. ROCHESTER NY 14445

Service Type

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

7. Date of Delivery

MAY 20 1993

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Is your RETURN AD

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

RDC NY 146 18:28 05/20/93 #2

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

BRIDON AMERICA CORP.
STEVENS LANE
EXETER

PA 18043

0278591958

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X 7

6. Signature — Agent

X Mona Suppler

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☒ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Bright Star Industry
388 Stewart Road
Hanover chel. Estates
Wilkes Barre, P.A.
18706-1459

4a. Article Number

P841 768 815

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery

9-14-93

5. Signature (Addressee)

Attn: William Vogt.

6. Signature (Agent)

Brenda Castellano

8. Addressee's Address (Only if requested and fee is paid)

SEP 14 1993

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

U.S. E.P.A.
26 FEDERAL PLAZA, RM 759
NEW YORK, NY 10278
ATTN: SUSANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

BROAD COVE TRUST
MEDOMAK ROAD
BREMEN

ME 04551

P278591960

Service:

Insured

☐ Insured

COD

☐ COD

Return Receipt
for Merchandise

☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

BRUNSWICK TIMES RECORD
PO BOX 10, INDUSTRY RD
BRUNSWICK ME 04011

4. Article Number

0278591961

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5.24.93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and date of delivery. For additional fees the following services are available. Consult postmaster for fees.

- ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

Article Addressed to:

4. Article Number

BUCKEYE PIPELINE
GATES ROAD
AUBURN

NY 13021

P278591962

Service:

- Registered ☐ Insured
Certified ☐ COD
Special Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X 

6. Signature - Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

TURN

0



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

BUCKNER OIL SERVICE INC
SLOOP HILL RD
NEW WINDSOR NY 12553

4. Article Number

P274591964

Service:

tered

☐ Insured

ied

☐ COD

ss Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-22-93

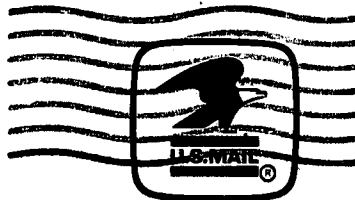
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: 4. Article Number

BUFFALO COLOR CORP. 100 LEE ST BUFFALO NY 14210		P28591965
		Service: <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Return Receipt for Merchandise
		Obtain signature of addressee or agent and <u>DATE DELIVERED</u> .

5. Signature — Addressee X <i>C. M. Hew</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery 5/24	

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

BUFFALO FREE TRADE COMPLEX
85 RIVER ROCK DRIVE
BUFFALO NY 14207

P278591966

Service:

tered

☐ Insured

ied

☐ COD

ss Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

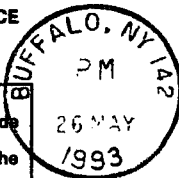
8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

BURROUGH HALL
8 N. MAIN ST.
ALLENTOWN

NJ 08501

P278591967

Service:

- Registered ☐ Insured
Registered Mail ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

Sarah Culver

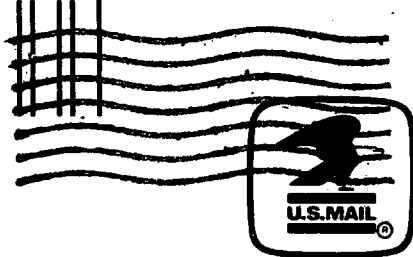
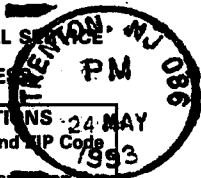
7. Date of Delivery

5.24.93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

BUS INDUSTRIES OF AMERICA
PO BOX 449 RD 1
ORISKANY NY 13424

P278591968

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

5-24-93 ME

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

C.R. BARD CATHETER & INSTRUMENT
266 BAY RD
GLENS FALLS NY 12804

0278591969

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5/24

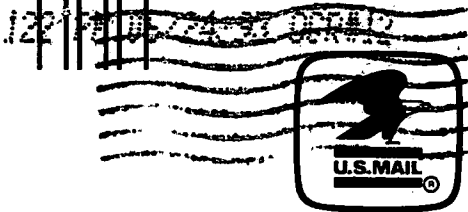
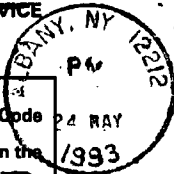
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CARBO THERM
175 PHILMONT AVE
FEASTERVILLE

PA 19053

0278591970

Service:

- Registered ☐ Insured
Certified ☐ COD
Express Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X 

6. Signature — Agent

X

7. Date of Delivery

3/24/92

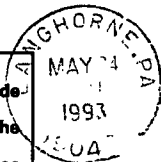
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CCL CUSTOM MANUFACTURING
35 MARTIN ST
CUMBERLAND

RI 02864

0278591972

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

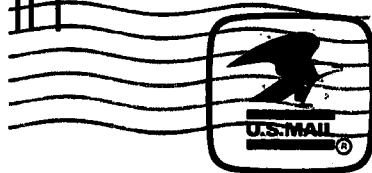
PROV RI 02804X PM 05/24/93 21:25 #13
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

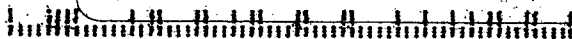
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

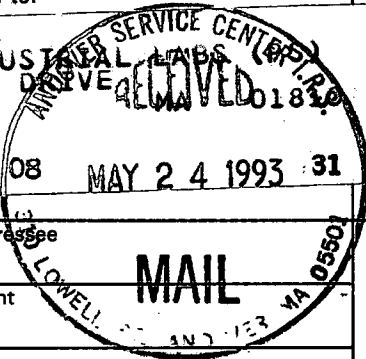
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CENTRAL INDUSTRIAL LABS
80 FLAGSHIP DRIVE
N. ANDOVER



P278591973

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

Obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address ONLY if requested and fee paid



UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CHALLENGE MFG
3079 THREE MILE RD
WALKER

MI 49504

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Main signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

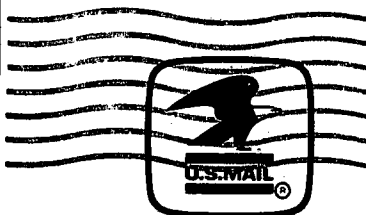
8. Addressee's Address (ONLY if requested and fee paid)

**UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS**

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

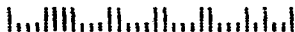
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CHAMPION PRODUCTS
200 NORTH MAIN PO BOX 87
PERRY NY 14530

0278591975

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

T. Benedict

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

RDC NY 146 19:19 05/24/93 #2

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

1993



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

CHARM GRAPHICS INC.
PO BOX 211
BUFFALO

NY 14225

4. Article Number

P278591976

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)



UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CHEMICAL LEAMAN TANK LINE
102 PICKERING WAY
EXTON PA 19341

0278591978

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☐

5. Signature — Addressee

X

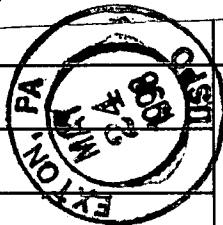
6. Signature — Agent

X

7. Date of Delivery

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CHEMCLENE CORPORATION
258 N. PHOENIXVILLE PIKE
MALVERN PA 19355

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

6. Signature — Agent

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

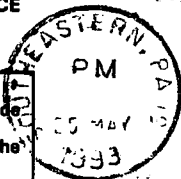
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

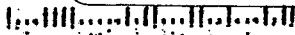
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CHEMICAL PROCESS & SPLY
3257 MIDDLE RD
DUNKIRK

NY 14048

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

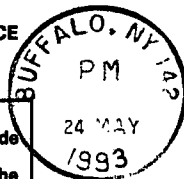
Pat Mitchell

7. Date of Delivery

5-24-93 OB

8. Addressee's Address (ONLY if requested and fee paid)

**UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS**



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

1 000



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CHESTER HOIST
7573 STATE RT. 45
LISBON

OH 44432

P278591980

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *T. F. Bourne*

6. Signature — Agent

X

7. Date of Delivery

8-22-97

8. Addressee's Address (ONLY if requested and fee paid)

L. P. O.

UNITED STATES POSTAL SERVICE

YOUNGSTEADT, N.J. 045
OFFICIAL BUSINESS
MAY 22 1983

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

PM 05/22/83 WLD 1



PENALTY FOR PRIVATE
USE, \$300

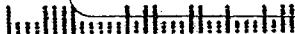
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

CHISLUM RYDER CO
COLLEGE & HIGHLAND AVES.
NIAGARA FALLS NY 14301

Service Type

Registered

☐ Insured

Certified

☐ COD

Express Mail

☐ Return Receipt for Merchandise

P253 158 187

7. Date of Delivery

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Carl C. Malinverni

Is your RETURN ADDRESS on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

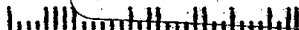


PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA
NEW YORK, NY 10278 ROOM 759
ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number **65**

CHROMIUM CORPORATION
8701 UNION AVENUE
CLEVELAND

OH

44105

P2878591983

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93 *Uluu*

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CITY OF SYRACUSE-DPW
1200 CANAL STREET, EXT.
SYRACUSE NY

13210

0278591984

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/25/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

STR NY 132 05/25/92 PM #6

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO

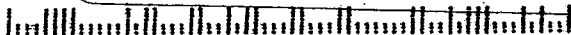


Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

03



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CITY PUMP & TANK
PO BOX 17186 1723 CLIFFORD AVE
ROCHESTER NY 14609

0278591985

Service:

- Registered ☐ Insured
Certified ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

Kathryn L. Bunnell

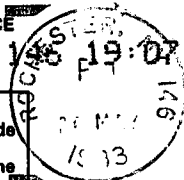
7. Date of Delivery

052693

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

NY 146



05/19/93 #2

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

CLARK GRAVE VAULT
175 E. 5TH AVE
COLUMBUS

OH 432..

4. Article Number

P278591986

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

MAY 25 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

CODO MFG.
AVE. B
LEETSDALE

PA 15056

4. Article Number

P258591987

Service: ☒ Insured

er: ☒ COD

ed: ☐ Return Receipt for Merchandise

egs Mail

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

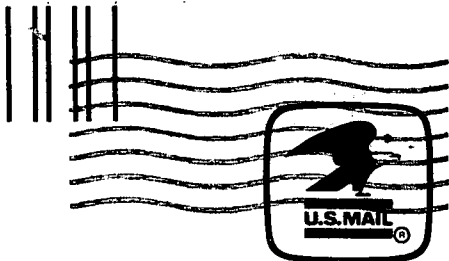
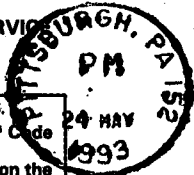
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS.

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

COMFORT DESIGN, INC.
263 SCHUYLER AVENUE
KINGSTON

PA

18704

P278591988

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Sarah Miller*

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

PM

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

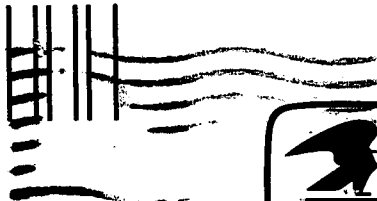
RETURN
TO



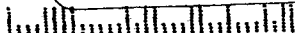
Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



PENALTY FOR PRIVATE
USE, \$300



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

COMMANDER MOTBY
ATTN: MTEA-GB-EHE
BAYONNE

NJ

BLDG.
07001

P278591989

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

03

MAY 25 1993

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

COMMUNITY MEDICAL CENT
1800 MULBERRY ST
SCRANTON PA 18510

P278591990

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



**PENALTY FOR PRIVATE
USE, \$300**

185 #1 05/24/93

on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

COMPUTER CONSOLES, INC
97 HUMBOLDT STREET
ROCHESTER NY 14609

Service Type

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

P 353 158 188

7. Date of Delivery

5-24-93

5. Signature (Addressee)

Rayce Mitchell

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

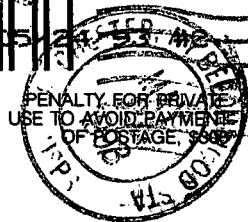
Is your RETURN ADDRESS on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

RDC NY 146

Official Business



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CONSTRUCTION SPECIALTIES

RTE 405

MUNCY

PA 17756

P278591992

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

5-24-93

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

CONTROL CHIEF CORPORATION

~~14 EGGERT ROAD~~

~~LEWIS RUN~~

PA

16738

PO Box 141

BRADFORD PA 16701

Service Type

Insured

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Method of Delivery

5-4-93

5. Signature (Addressee)

[Signature]

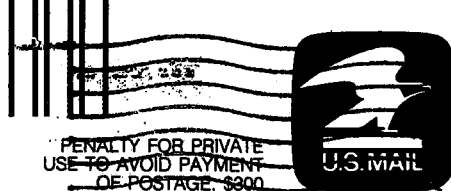
6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

CORSON MFG. CO., INC
20-24 MICHIGAN STREET
LOCKPORT NY

14094

4. Article Number

PS 8591994

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

05-24-83

8. Addressee's Address (ONLY if requested and fee paid)

FB

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ALPINE PRESS
100 ALPINE CIRCLE
STOUGHTON

MA 02672

0278591926

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

17:04

08/24/93

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CREATIVE PRINTING
2011 E. MAIN ST
ENDWELL

NY 13760

P278591995

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

05/24/93 PM 11:14 NY 139

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

1 000



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

CREST FOAM
100 CAROL ST
MOONACHIE

NJ 07074

4. Article Number

0278591996

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X Florence Delppa

6. Signature — Agent

X

7. Date of Delivery

5/21

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA, ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

CRETER VAULT CORP.
RTE 202 SOUTH, BOX 751
FLEMINGTON NJ 08822

4. Article Number

9278591997

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

DURIRON CO. INC.
4542 HARDPAN ROAD
ANGOLA

NY 14006

0278592113

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

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Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DYNAMIC HYDROBLASTING
2625 E. BROADWAY
ALTON

IL 62002

4. Article Number

P278592114

Service:

ered

☐ Insured

ed

☐ COD

s Mail

☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-27

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

EM CORP.
16470 EAST 13 MILE ROAD
ROSEVILLE MI 48066

P278592124

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X Susan M. DeVay

6. Signature — Agent

X

7. Date of Delivery

S-22-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

EASTERN COLOR & CHEMICAL
35 LIVINGSTON ST.
PROVIDENCE RI 02940

4. Article Number

P278592115

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

EASTERN CONSOLIDATED AND DIST.
2244 OLD GETTYSBURG RD
CAMP HILL PA 170..

4. Article Number

P278592116

Service:

- er ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *C. Hiese*

6. Signature — Agent

X

7. Date of Delivery

5-25-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

G.P.A. 170 (ST-1120) OFFICIAL BUSINESS DCR#3 05/25/93 PM

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

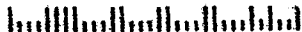
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

EASTERN ELEC APPARATUS
160 TOPLEY STREET
SPRINGFIELD

MA 01104

4. Article Number

P278592117

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 8 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

11 SPFLD MA 20:10
OFFICIAL BUSINESS

05/24/93 #1

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 ~~with~~ additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

EASTERN INDUSTRIES
RTE 61 & 90
SHAMOKIN

PA 17889

Service:

- ☐ Insured
☐ COD
☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X *[Signature]*

6. Signature - Agent

X

7. Date of Delivery

E-25 9/8/88

8. Addressee's Address (*ONLY if requested and fee paid*)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☒ **Show to whom delivered, date, and addressee's address.** 2. ☐ **Restricted Delivery**
 (Extra charge) (Extra charge)

3. Article Addressed to:		4. Article Number	
EATON CORP 240 6TH ST MASSILLON OH 44647		P278592119 Service: <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Return Receipt for Merchandise	
5. Signature — Addressee		6. Signature — Agent	
X <i>James Booth</i>		X	
7. Date of Delivery		8. Addressee's Address (ONLY if requested and fee paid)	
5/24			

UNITED STATES POSTAL SERVICE

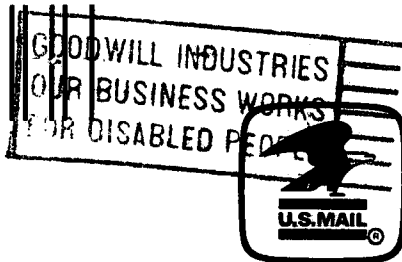
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "Return to" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

EGGERS INDUSTRIES
164 N. LAKE ST.
NEENAH

WI 54956

4. Article Number

0278592120

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

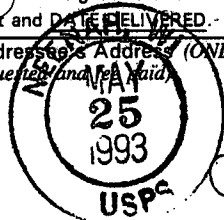
X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

EICHEL BERGERS
841 W. TRIDLE RD
MECHANICSBURG

PA 17055

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-22-93 ALK

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

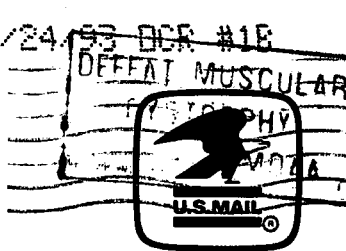
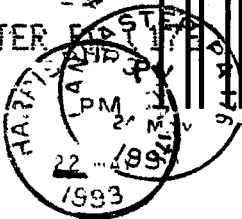
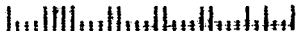
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



**PENALTY FOR PRIVATE
USE, \$300**

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

ELCO CORPORATION
INDUSTRIAL PARK
HUNTINGTON

PA 16632

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ELECTRIC MATERIALS CO
50 S. WASHINGTON STREET
NORTH EAST PA 16428

4. Article Number

P278592123

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X 

7. Date of Delivery

MAY 24 1993

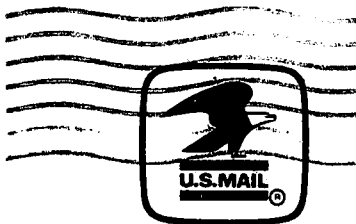
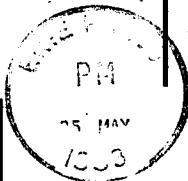
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

THE ELECTRIC MATERIALS CO
50 S. WASHINGTON ST
NORTHEAST PA 16428

4. Article Number

0071550086

Service:

- Registered ☒ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1989

8. Addressee's Address (ONLY if requested and fee paid)

3
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article: "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Horizontal postal barcode lines

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ENVIRONMENTAL DEPOT (PS)
339 PINE ST
BURLINGTON

VT 05401

P278592126

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

Penny McInnath
5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ENVIRONMENTAL WASTE MGMT
RD4 BOX 4126
MOHNTON

PA 19540 CC

0278592107

Service:

Registered

☐ Insured

Express

☐ COD

Special Mail

☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X 

6. Signature — Agent

X

7. Date of Delivery

5-24

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- **Complete Items 1, 2, 3, and 4 on the reverse.**
- **Attach to front of article if space permits, otherwise affix to back of article.**
- **Endorse article "Return Receipt Requested" adjacent to number.**



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER**

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered date, and addressee's address. (Extra charge)
2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

EPICURE PRODUCTS, INC.
25 HALE ST
NEWBURYPORT

MA 01950

P278592128

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

8. Addressee's Address (*ONLY if requested and fee paid*)

6. Signature — Agent

7. Date of Delivery

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ERIE COUNTY WATER AUTH.
STURGEON POINT ROAD
DERBY NY 14047

P278592129

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Joseph W. Kaminski*

6. Signature — Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ERIE INSURANCE GROUP
100 ERIE INSURANCE PLACE
ERIE PA 16530

4. Article Number

P278592130

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 22 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ERIE PLASTICS
1 PLASTICS RD
CORY

PA 16407

PS 78592131

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X Margie Martin

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (*ONLY if requested and fee paid*)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

ETI TANK CLEANING SERV
1500 ORENDA
MEMPHIS

TN 38107

P278592132

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X *J. Morgan*

6. Signature — Agent

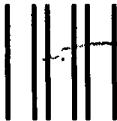
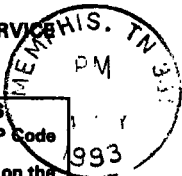
X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code
in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

EUREKA SECURITY PRINTING
101 CHURCH ST.
JESSUP PA 18434

P078592133

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

524-93

8. Addressee's Address (*ONLY if requested and fee paid*)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS SCRANTON PA 185 #1 05/24/93

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

FANCHER FURNITURE
100 ROCHESTER ST
SALAMANCA

NY 14733

7P278592135

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

Obtain agent and DATE DELIVERED.

5. Signature — Addressee

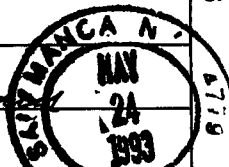
X

8. Addressee's Address (ONLY if requested and fee paid)

6. Signature Agent

X

7. Date of Delivery

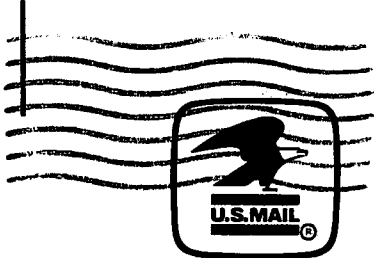
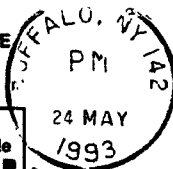


UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

FERRO CORPORATION (VESUVIUS)
661 WILLET ROAD
BUFFALO NY 14218

0278592136

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

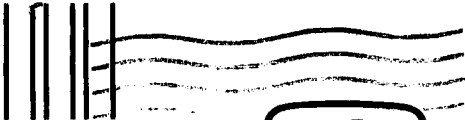
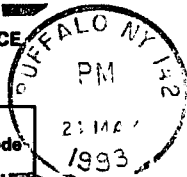
X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



**PENALTY FOR PRIVATE
USE, \$300**

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

FISHER INDUSTRIAL SVCE INC
RT. 9, BOX 3984
GADSDEN AL 35903

P278592138

Service:

- ☐ Insured
☐ COD
☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

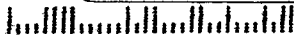
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

FISHER PRICE TOYS
711 PARK AVENUE
MEDINA

NY

14103

4. Article Number

0278592139

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and **DATE DELIVERED.**

5. Signature — Addressee

X Susan Green

6. Signature — Agent

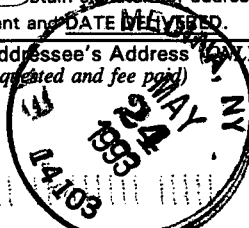
X

7. Date of Delivery

5/24/93

S.B.

8. Addressee's Address (ONLY if requested and fee paid)

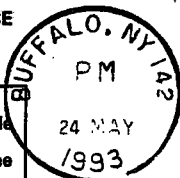


UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

FLACH INDUSTRIES
RTE 9W PO BOX 246
GLENMONT

NY 12077

4. Article Number

P278592140

Service:

- Registered ☐ Insured
Certified ☐ COD
First Class Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-25-93

8. Addressee's Address (ONLY if requested and fee paid)

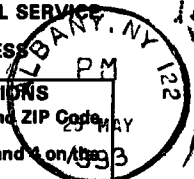
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



122 PM MAY 23 1993 #43



PENALTY FOR PRIVATE
USE, \$300

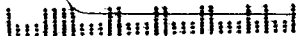
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

FLINT INK
3520 E. FEDERAL STREET
BALTIMORE MD

21213

P278592141

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

8. Addressee's Address (ONLY if requested and fee paid)

6. Signature — Agent

X

7. Date of Delivery

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: 4. Article Number

FOAMEX PRODUCTS, INC.
466 SHADY AVENUE
CORY
PA 16407

0278590142

- Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

tain signature of addressee and DATE DELIVERED.

5. Signature - Addressee
X
6. Signature - Agent
X
7. Date of Delivery
5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

24 MAY
1993

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

FOSECO, INC.
20200 SHELDON RD
CLEVELAND

OH 44142

P278592144

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (*ONLY if requested and fee paid*)

10 BOSTON, MA 02101 MAY 25/93 74
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

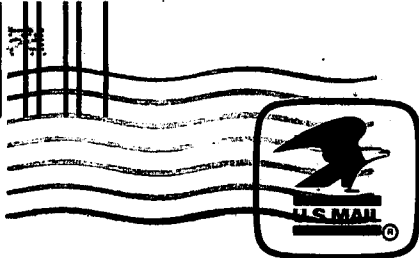
RETURN
TO



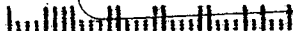
Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



PENALTY FOR PRIVATE
USE, \$30



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

FORMS, INC
PENN TURNPIKE
WILLOW GROVE

PA 19090

4. Article Number

P278592143

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X Theresa Deane

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if requested and fee paid)

MAY 24 1993

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

Begin an Adventure of
Giant Proportions
Collect Stamps!



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

FRAMINGHAM WELDING
120 LELAND ST
FRAMINGHAM

MA 01701

4. Article Number

P278592145

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

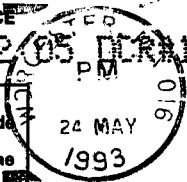
7. Date of Delivery

MAY 24

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



01613

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

FRANK ELECTRIC CORP.
700 WILLOW SPRINGS LANE
YORK PA 17405

4. Article Number

P278592146

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☐

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

Obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

MAY 24 1993

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

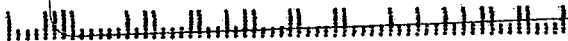
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

FRICK CO.
345 W. MAIN STREET
WAYNESBORO

PA 17268

4. Article Number

0278592147

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Signature of addressee

or agent and **DATE DELIVERED.**

5. Signature — Addressee

X

6. Signature — Agent

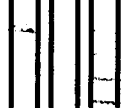
X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



**PENALTY FOR PRIVATE
USE, \$300**

SENDER INSTRUCTIONS

Print your name, address and ZIP Code
in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

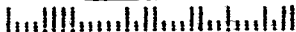
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

FRUEHAUF CORP
RT 119 NORTH
UNION TOWN

PA 15401

4. Article Number

P278592148

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

Obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card being returned to you. The return receipt fee will provide you the name of the person delivered to and date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

FUJITECH
72 SHARP ST
HINGHAM

MA 02043

P278592149

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

Stinky

8. Addressee's Address (ONLY if requested and fee paid)

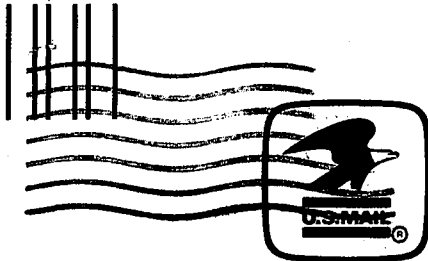
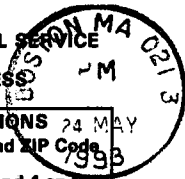
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

FULLER CO.
236 CHERRY ST.
MANHEIN

PA 17545

4. Article Number

P278592150

Service:
Registered

- ☐ Insured
☐ COD
☐ Return Receipt
for Merchandise

Special Mail

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Robert Fuller Co.*

6. Signature — Agent

X

7. Date of Delivery

5.24.93

8. Addressee's Address (ONLY if requested and fee paid)

LANCASTER PA. (1740) 05/24/93 DCR #18

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

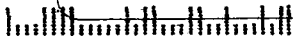
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

G.W. LISK CO., INC.
2 SOUTH STREET
CLIFTON SPRINGS NY 14432

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-53

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

FOL NY 146 20:23 05/24/93 #4

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

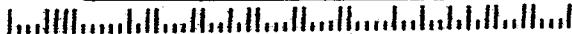
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

GARDENWAY MFG
29 102ND ST
TROY

NY 12180

P278592152

Service:

- ☐ Insured
☐ COD
☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

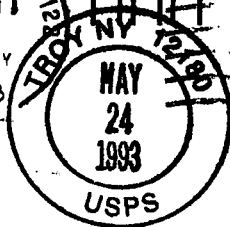
8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GEM CHEM, INC.
140 KLEINE LANE
LITITZ

PA 17543

4. Article Number

P278592154

Service:

ered

☐ Insured

ed

☐ COD

s Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature of Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/29/93

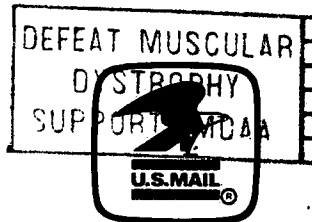
8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GENERAL CHEMICAL CORP.
133 LEALAND ST.
FRAMINGHAM MA 01701

4. Article Number

P278592155

Service:

- Registered ☐ Insured
Registered Mail ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

6. Signature — Agent

X

7. Date of Delivery

MAY 24

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



NDP 01613

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GENERAL SERVICES ADMIN
FEDERAL BLDG. STATE ST.
MONTPELIER VT 05602

4. Article Number

P278592156

Service:

- Registered ☒ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-26-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GENESEE HOSPITAL
224 ALEXANDER STREET
ROCHESTER NY 14607

4. Article Number

0278592157

Service:

- red ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

GENTEX CORPORATION
MAIN ST., RT. 171
SIMPSON

PA 18407

4. Article Number

P278592158

Service:

- er ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

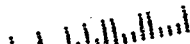
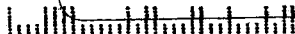
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2-when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GEORGE INDUSTRIES
1 SOUTH PAGE ST
ENDICOTT

NY 13670

4. Article Number

P278592159

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

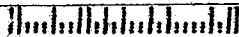
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address: (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GICHNER MOBILE SYSTEMS
401 BRIDGE ST
OLD FORGE PA 18518

4. Article Number

P278592160

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

S-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

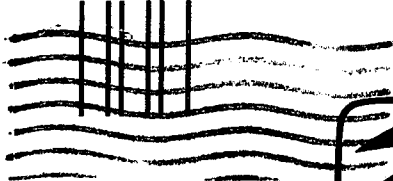
**RETURN
TO**



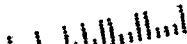
Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



**PENALTY FOR PRIVATE
USE, \$300**



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GIDDINGS & LEWIS
31700 SHERWIN RD
SOLON OH 44139

4. Article Number

P278592161

Service:

- Registered ☐ Insured
Certified ☐ COD
Priority Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

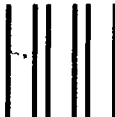
Mel Hoetzel

7. Date of Delivery

5-26-93 MZ

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GILBERT & BENNETT
N. MAIN ST.
GEORGETOWN

CT 06229

4. Article Number

0278592162

Service:

ered

☐ Insured

ed

☐ COD

s Mail

☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/25/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

STMF CT 089 21 01 05 23 55 45

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GILBERT/COMMONWEALTH, INC.
PO BOX 618
LIBRARY

PA 15129 9

4. Article Number

0278592163

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

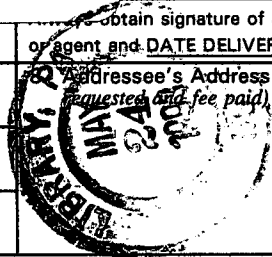
X *Leonard F. Hunt*

6. Signature — Agent

X

7. Date of Delivery

Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when ~~personal~~ services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GLEDHILL RD MACHINE CO.
765 PORTLAND WAY SOUTH
GALION OH 44833

4. Article Number

0278592164

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and **DATE DELIVERED.**

5. Signature — Addressee

X

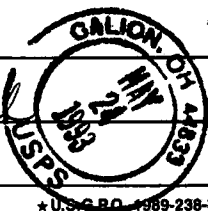
6. Signature — Agent

X

Shirley L. Dill

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

THE GLOBE NEWSPAPER CO
135 MORRISSEY BLVD
BOSTON MA 02107

4. Article Number

P071550088

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

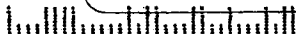
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

GOLD MEDAL LADDER
21 REWEY AVENUE
NEWARK VALLEY

NY 13811

P278592165

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and DATE DELIVERED. 5-24-93

5. Signature — Addressee

X *Dezz J. Price*

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GOOD SAMARITAN HOSPITAL
700 NORWEGIAN STREET
POTTSVILLE PA 17901

4. Article Number

0278592166

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/83

8. Addressee's Address (*ONLY if requested and fee paid*)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



ALWAYS
USE ZIP CODE



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code
in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

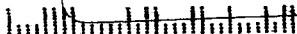
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

GOURD NELSON
2155 WADHAMS RD
ST CLAIR

MI 48074

P278592168

Service:

- ☐ Insured
☐ COD
Mail ☐ Return Receipt
for Merchandise

in signature of addressee

or agent and **DATE DELIVERED.**

5. Signature — Addressee

6. Signature — Agent

7. Date of Delivery

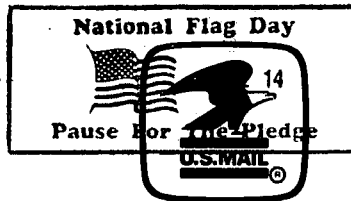
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

GRAND HAVEN FURNITURE
715 ROBBINS RD
GRAND HAVEN MI 49417

4. Article Number

9278592169

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Scott O. Norton

7. Date of Delivery

5/24/93 az

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN ADDRESS printed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

GTE PRODUCTS CORP.
825 LEXINGTON AVENUE
WARRREN PA

16365

P353 158 191

Service Type

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Method of Delivery

5-20-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

K HART

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



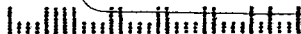
PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

GTE SYLVANIA
835 WASHINGTON ROAD
ST MARYS PA 15875

0278592170

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *John Allay*

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

H.B. IVES
50 IVES PLACE
NEW HAVEN

CT 06511

4. Article Number

0278592171

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

24 MAY 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

NEW HAVEN, CT .065 DCR#10 03/24/93 22:31

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to: —

4. Article Number

HANDY & HARMAN TUBE CO
WHITEHALL & TOWNSHIP ROAD
NORRISTOWN PA 19403

0278592172

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

P353 158 192

Service Type

Registered

☐ Insured

Express

☐ COD

Special Mail

☐ Return Receipt for Merchandise

HARRIS CORP/RF COMMUNICATIONS
570 CULVER ROAD
ROCHESTER NY 14609

7. Date of Delivery

5-20-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Andy Smith

UNITED STATES POSTAL SERVICE

Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA
NEW YORK, NY 10278

ROOM 759

ATTN: MS. SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

HASKELL OF PITTSBURGH
231 HASKELL LANE
VERONA

PA 15147

P278592173

Service:

- ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
RECEIVED LRP FGM PA 152 05/24/93 PM 11:00R 68
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

HAYDEN ENVIRONMENTAL
6015 MANNING RD
MIAMISBURG

OH

45342

4. Article Number

0278592174

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

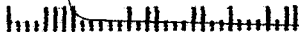
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

HEDSTROM CORPORATION
SUNNYSIDE RD
BEDFORD

PA 15522

4. Article Number

0278592175

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

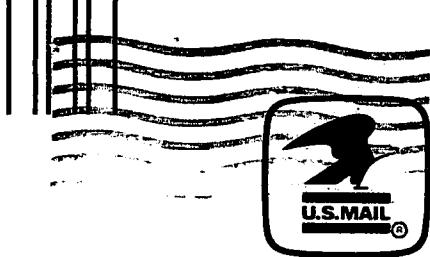
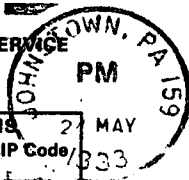
X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

HENRY L. HINCKLEY CO.
SHORE RD
SOUTHWEST HARBOR ME

04679

4. Article Number

P278592176

Service:

ered



Insured

ed



COD

s Mail



Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

Leah Tucker

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

THE HENRY HINCKLEY CO.
SHORE RD
SOUTHWEST HARBOR ME 04679

PO71550089

Service:

- er ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

Leslie Tucker

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

HESS & CLARK, INC.
SEVENTH & ORANGE ST
ASHLAND

OH 44805

4. Article Number

0285592177

Service

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

Amy B. Pickering

7. Date of Delivery

5-2-98

8. Addressee's Address (ONLY if requested and fee paid)

AP

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

HONEY COMB SYSTEMS, INC
RET: 111, PO BOX 502
BIDDEFORD

ME 04005

4. Article Number

985

P278X592179

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and **DATE DELIVERED.**

5. Signature — Addressee

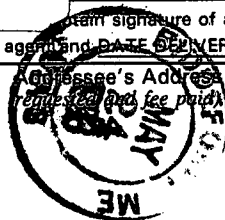
X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

HOWARDS EXPRESS
E. NORTH STREET
GENEVA

NY 14456

4. Article Number

P071550525

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

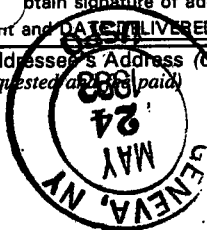
X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)



RDC NY 146 17:30 05/24/93 #3

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

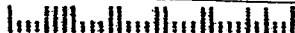
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2, when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

P071550524

Service:

- Registered ☐ Insured
Certified ☐ COD
Express Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (*ONLY if requested and fee paid*)

HUB FOLDING BOX CO., INC
774 NORTH ST
MANSFIELD MA 02048

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

HUNTINGDON ANALYTICAL SVC
144 TELEGRAPH
MIDDLEPORT NY 14105

0071550523

Service

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

8. Addressee's Address (ONLY if requested and fee paid)

6. Signature — Agent

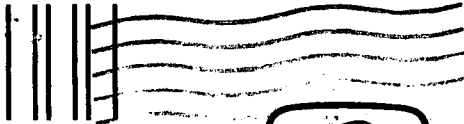
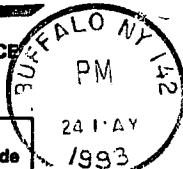
X

7. Date of Delivery

5/24/93

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code
in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. **HUTCHINSON HOUSEHOLD (PS)**
ROUTE 2/PO BOX 253
PLAINFIELD VT 05667

4. Article Number

P071550522

Service:

- red ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X *Thomas Ray Gray*

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

HYDROSAMPLE DIVISION (PS)
367 W. MAIN ST
NORTHBORO MA 01532

4. Article Number

0071550521

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X Joan Barranone

6. Signature — Agent

X

7. Date of Delivery

Jul

8. Addressee's Address (ONLY if requested and fee paid)

05/24/93 20:11 DLK#3 MIA IN 01010

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

IMAGING & SENSING TECHNOLOGY
WESTINGHOUSE CIRCLE
HORSEHEADS NY 14845

P071550518

Service:

- tered ☐ Insured
ied ☐ COD
ss Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Hori Willis*

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

ELMIRA N.Y. 149 05/24/93 17:56
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

IMO INDUSTRIES
21611 TUNGSTEN RD
EUCLID

OH 44117

P071550517

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and **DATE DELIVERED.**

5. Signature — Addressee

X *[Signature]*

6. Signature — Agent

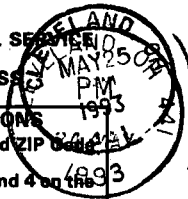
X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

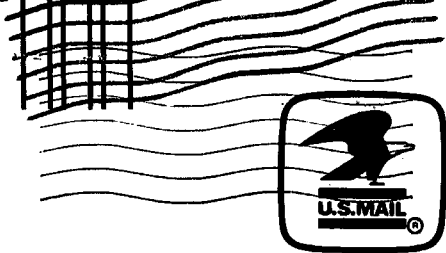
UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

INDEPENDANT CABLE CO.
43 BROAD STREET
HUDSON MA 01749

4. Article Number

PO71550516

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *M. Flender*

6. Signature — Agent

X

7. Date of Delivery

5.24.93

8. Addressee's Address (ONLY if requested and fee paid)

05/24/93 17:23 WDRXXO 613X DCR#2

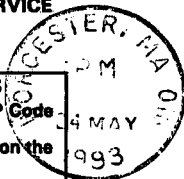
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

100



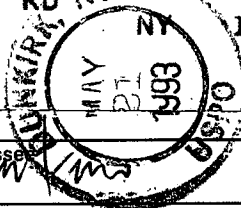
● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

INDUSTRIAL VACUUM SERV.
4735 W. LAKE RD NY
DUNKIRK NY 14048



4. Article Number

P071550514

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

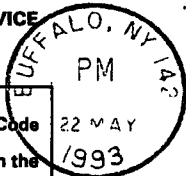
X

7. Date of Delivery

5/22/93

8. Addressee's Address (ONLY if requested and fee paid)

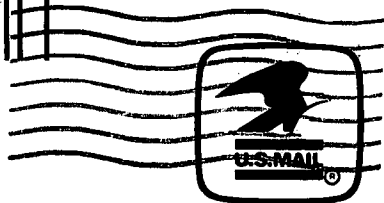
UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

INGERSOL-RAND CO.
101 N. MAIN ST
ATHENS

PA 18810

P071550513

Service:

tered

☐ Insured

ied

☐ COD

ss Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE-DELIVERED.

5. Signature — Addressee

X

8. Addressee's Address (*ONLY if requested and fee paid*)

6. Signature — Agent

X

7. Date of Delivery

Fred C. Gregory III
5-22-93

UNITED STATES POSTAL SERVICE

PA 187 OFFICIAL BUSINESS WILKES-BARRIE, PA 18702
22 MAY 1983

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

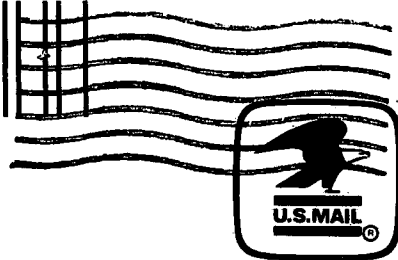
**RETURN
TO**



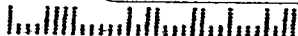
Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



**PENALTY FOR PRIVATE
USE, \$300**



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

INTERMARK FLOCK CORP (A) (PS)
BAY STATE TRUCK, 527 WINTHROP
ROHOBOTH MA 02769

P071550511

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X Jack Haskins

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

CSMS NATIONAL GUARD
BARNUM ST
FORT DEVONS

MA

01433

P278591999

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

24 May 93

8. Addressee's Address (ONLY if requested and fee paid)

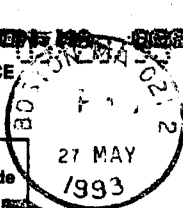
09 BOSTON MA 02205
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

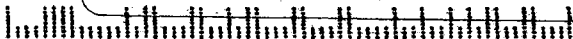
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

CUSTOM DESIGN SERVICES
30 SOUTH STREET
DANBURY

CT 06810

4. Article Number

P278592000

Service:

- Registered ☐ Insured
Registered Mail ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

Signature and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X *Cherie Magname*

7. Date of Delivery

5-21-93

8. Addressee's Address (ONLY if requested and fee paid)

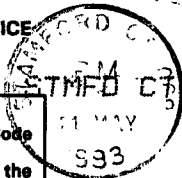
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

CYCLE CHEM, INC.
217 S. 1ST ST
ELIZABETH

NJ 07206

4. Article Number

P278592001

Service:

- red ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *O. Pleasant*

6. Signature — Agent

X

7. Date of Delivery

5-24

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

D.C. AUTOMOTIVE
8262 GLEAN RD
HOLLAND

NY 14080

4. Article Number

P278592003

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Carol Haas

7. Date of Delivery

5-27-93

8. Addressee's Address (ONLY if requested and fee paid)

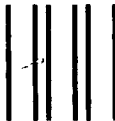
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

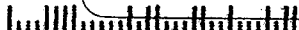
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DANA CORPORATION
182 S. MAIN ST.
FREDRICKSTOWN

OH 43019

4. Article Number

P278592004

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

and DATE DELIVERED.

5. Signature — Addressee

X *Landra Lovett*

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DARWORTH COMPANY
50 TOWER LANE
AVON

CT 06001

4. Article Number

0278592005

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

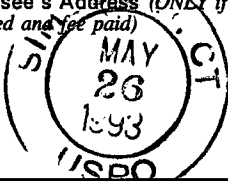
6. Signature — Agent

X

7. Date of Delivery

5-26-93

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

Is your RETURN AD-
dated on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

David F. Toomey, Esq.
Office of District Counsel
U.S. Dept. of Veterans Affairs
John F. Kennedy Federal Building
Boston, MA 02203

4a. Article Number

P 752 210 239

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery

4-18-94

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Yosh S. Eli

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



APR 22 1994

Print your name, address and ZIP Code here

U.S. ENVIRONMENTAL PROTECTION AGENCY
REGION II
OFFICE OF REGIONAL COUNSEL
NEW YORK/CARIBBEAN SUPERFUND BRANCH
26 FEDERAL PLAZA — ROOM 437
NEW YORK, NEW YORK 10278

Kessel

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Defense Fuel Supply Depot
Route 123
S. Harpswell, ME 04079
Attn: Harry W. Grinder

4a. Article Number

P752 210238

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery

4-16-91

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

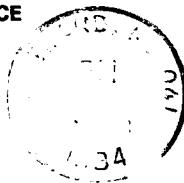
6. Signature (Agent)

David S. Merriman

PORTLAND, ME 04104 04/16/94 21:12 DCR2

UNITED STATES POSTAL SERVICE

Official Business



DO SOMETHING

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



APR 20 1994

Print your name, address and ZIP Code here

U.S. ENVIRONMENTAL PROTECTION AGENCY
REGION II
OFFICE OF REGIONAL COUNSEL
NEW YORK/CARIBBEAN SUPERFUND BRANCH
28 FEDERAL PLAZA — ROOM 437
NEW YORK, NEW YORK 10278

Russell

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

DEGRAFF MEMORIAL HOSPITAL
445 TREMONT ST.
N. TONAWANDA NY 14120

P278592007

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

80

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

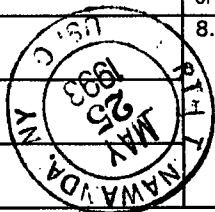
X

6. Signature — Agent

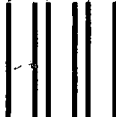
X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



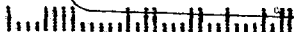
**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DELEVAN INDUSTRIES
1728 WALDEN AVENUE
BUFFALO

NY 14225

4. Article Number

P278592102

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

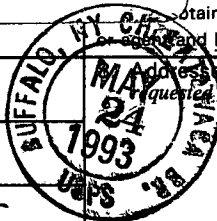
5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DEL MONTE CORPORATION
909 LINDEN AVENUE
ROCHESTER NY 14625

4. Article Number

0278592103

Service:

Registered

☐ Insured

Ad

☐ COD

Special Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and **DATE DELIVERED.**

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-26-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

R01 NY 146 21:19 05/24/93 #4

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DELTA RUBBER CO.
34 WAUREGAN RD
DANIELSON

CT 06239

4. Article Number

0278592104

Service:

- Registered ☐ Insured
Certified ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO:**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

DELVECCHIO TRANSPORT
PO BOX 480
DUNMORE

PA 18512

P278592105

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

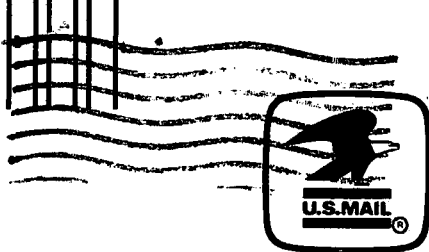
Marge Caputo

7. Date of Delivery

5-27-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



PENALTY FOR PRIVATE,
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code
in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt ~~fee~~ will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

DENNISON OIL CO
25 MARION DRIVE
KINGSTON

MA 02364

P278592106

Service:

tered

☐ Insured

ied

☐ COD

ss Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X 

6. Signature — Agent

X

7. Date of Delivery

6/25 me

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

DE STEFANO
34 COMMERCE WAY
WOBURN

MA 01801

P278392006

Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature Addressee

X Paul DeStefano

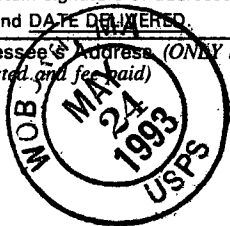
6. Signature — Agent

X

7. Date of Delivery

5/24 P.J.

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DIAMOND EAST LABORATORY
WOODGLEN & ANTHONY RDS
GLEN GARDNER NJ

08826

4. Article Number

P278592107

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



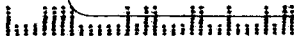
Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



**PENALTY FOR PRIVATE
USE, \$300**



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

THE DINGLEY PRESS
119 LISBON RD
LISBON

ME 04250

4. Article Number

P071550085

Service:

- Registered ☒ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Charles J. Hall*

6. Signature — Agent

X

7. Date of Delivery

5/24/93

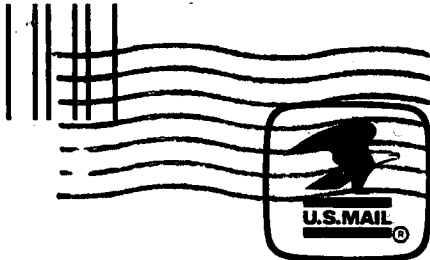
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DONLEE TECHNOLOGY INCORP
693 N. HILL RD
YORK

PA 17402

4. Article Number

P278592108

Service:

- Registered ☐ Insured
Certified ☐ COD
Priority Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if requested and fee paid)

LANCASTER PA (195) 05/24/93 DCR #16
PM
24 MAY
1993

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DONSCO, INC.
NORTH FRONT ST
WRIGHTSVILLE

PA 17368

4. Article Number

0278592109

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Don Beck*

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

HELP GOODWILL INDUSTRIES

HELP THE HANDS OFF



PENALTY FOR PRIVATE
USE, \$300

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

DRESSER MFG. DIVISION
41 FISHER AVENUE
BRADFORD

PA 16701

P278592110

Service:

- Registered ☐ Insured
Registered Mail ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

5. Signature — Addressee

X

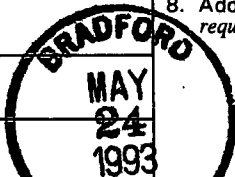
6. Signature — Agent

X

7. Date of Delivery

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

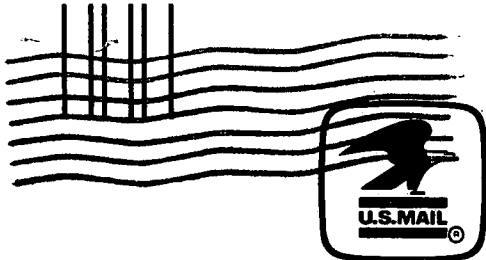
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



**PENALTY FOR PRIVATE
USE, \$300**

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

DUNKIRK RADIATOR CORP.
85 MIDDLE ROAD
DUNKIRK

NY 14048

4. Article Number

10278592112

Service:

- ☐ Insured
☒ COD
☒ Return Receipt
for Merchandise

Signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

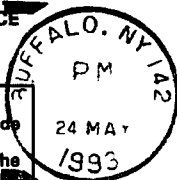
14048

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: INTERNATIONAL PAPER CO S. HIGHLAND ST LOCKHAVEN PA 17745		4. Article Number P071550509
		Service: <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Return Receipt for Merchandise
5. Signature — Addressee X		8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>S. K. Bana</i>		
7. Date of Delivery <i>5 24 93</i>		

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

ITT HIGBIE
701 LUGHILL RD
ARCHBOLD

OH 43502

4. Article Number

P071550507

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 27 1993

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

J.B. SLEVIN CO. INC.
300 EAST BALTIMORE AVE.
LANSDOWNE PA 19050

4. Article Number

P071550505

Service:

Registered

☐ Insured

Express

☒ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93 M7

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

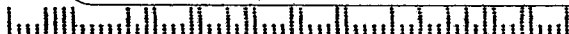
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

J & D AUTOMOTIVE
2190 CLINTON ST
BUFFALO

NY 14206

P071550506

Service:

Insured

☐ Insured

ed

☐ COD

ss Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

ad on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.*
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

J.M. CANTY
590 YOUNG ROAD
TONAWANDA

NY 14150

Service Type

Registered

☐ Insured

Certified

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Date of Delivery

5-20-93

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

Is your RETURN AD

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

JAMESTOWN ELECTROPLATING WORKS
105 WATER ST
JAMESTOWN NY 14702

P071550504

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

8. Addressee's Address (ONLY if requested and fee paid)

7. Date of Delivery

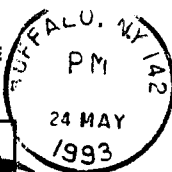
5-24-93

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

JESSUP DOOR CO.
300 E. RAILROAD ST
DOWAGIAC

MI 49047

4. Article Number

071550503

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

6. Signature — Agent

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JOSLYN MFG. & SUPPLY CO.
7574 EAST MAIN ROAD
LIMA NY 14485

4a. Article Number

P353 158 195

ice Type

tered

☐ Insured

ied

☐ COD

ss Mail

☐ Return Receipt for Merchandise

of Delivery

5/20

5. Signature (Addressee)

Wendy Gould

6. Signature (Agent)

[Signature]

8. Addressee's Address (Only if requested and fee is paid)

Is your RETURN ADD

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

RDC NY 146 20:55 05/20/93 #2

Official Business

20 MAY

1993

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

Is your RETURN ADDRESS on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

JOY MFG. CO.
3101 BROADWAY AVENUE
BUFFALO NY 14225

P 353 158 196

Service Type

Insured

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

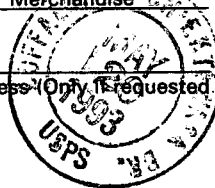
Signature of Delivery

5. Signature (Addressee)

6. Signature (Agent)

Bill Rogers

8. Addressee's Address (Only if Requested and fee is paid)



PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

KEENEY MANUFACTURING CO
1170 MAIN ST
NEWINGTON CT 06111

4. Article Number

P071550499

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

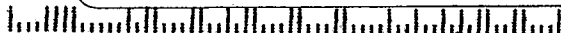
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

KEM PLAYING CARDS
2-12 BECK PLACE
POUGHKEEPSIE

NY 12601

4. Article Number

P071550498

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/04/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

KENMORE TON. UNION FRE
1500 COLVIN BLVD.
KENMORE

NY 14223

0071550497

Service:

- ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



See back of reverse side?

Is your RETURN AD

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

PO BOX 350
KENNECOTT-PROCESS EQUIPMENT
DIV BLDG W4-1 WALMORE RD
NIAGARA FALLS NY 14303

Service Type

Registered

☐ Insured

Certified

☐ COD

Express Mail

☐ Return Receipt for Merchandise

Date of Delivery

5. Signature (Addressee)

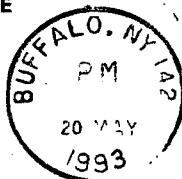
8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300

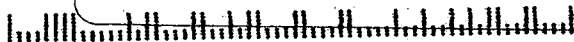


Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

100000 000



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

KENSINGTON INDUSTRIES
69 PUBLIC SQUARE, SUITE 904
WILKES BARRE PA 18702

4. Article Number

P071550496

Service:

- Registered ☐ Insured
Certified ☐ COD
Priority Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

RETURN

TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. MAY 4 1993

1. ☐ Show to whom delivered, date, and addressee's address.
(Extra charge)

2. ☐ Restricted Delivery
(Extra charge)

3. Article Addressed to:

4. Article Number

KEYES FIBRE CO
100 COLLEGE AVENUE
WATERVILLE

ME 04901

POST 71550495

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X 

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge)
2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

KEYSTONE CARBON CO
1935 STATE ST
SAINT MARYS PA 15857

P071550494

Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

5. Signature — Addressee
X

Obtain signature of addressee or agent and DATE DELIVERED.

6. Signature — Agent
X

8. Addressee's Address (ONLY if requested and fee paid)

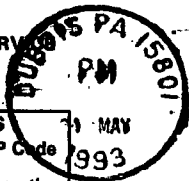
7. Date of Delivery
George Yarn 5/24/93

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



NOV 168



PENALTY FOR PRIVATE
USE, \$300

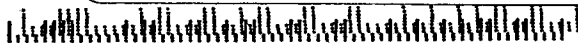
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

K-MART #7171
1460 FRENCH RD
DEPEW

NY 14043

P071550501

Service:

- erred ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-22-93

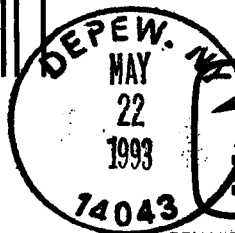
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge)
2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

KNOX SEMICONDUCTOR
ROCKPORT INDUSTRIAL PARK
ROCKPORT ME 04856

4. Article Number

0071550493

Service:

- Registered ☐ Insured
Certified ☐ COD
Special Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



**PENALTY FOR PRIVATE
USE, \$300**



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

KOA SPEER ELECTRONICS, INC
BOLIVAR DRIVE
BRADFORD PA 16701

P071550492

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Phyllis Brown*

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

NOV 26 1988

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

KWIK FILL (A)
5251 W. RIDGE RD
PARMA

NY

14559

4. Article Number

PO71550491

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☒ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address (ONLY if requested and fee paid)

RDC NY 146 21:48 05/26/93 #3

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

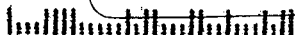
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

KWIK FILL (B)
ELLICOTT & JACKSON
BATAVIA

NY 14020

PO71550490

Service:

- Registered ☐ Insured
Certified ☐ COD
Priority Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

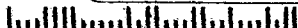
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

LADESCO, INC.
150 DOW ST, TOWER #4
MANCHESTER NH 03101

PO71550489

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

8. Addressee's Address (ONLY if requested and fee paid)

6. Signature — Agent

X Michelle Dumes

7. Date of Delivery

SP4

UNITED STATES POSTAL SERVICE

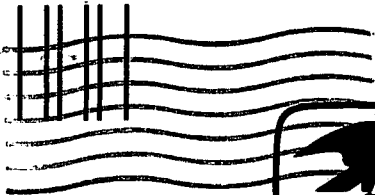
OFFICIAL BUSINESS

PM

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

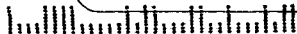
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LANKENAU HOSPITAL
100 LANCASTER AVENUE
LYNNEWOOD PA 19096

4. Article Number

PO71550488

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

P11

PHILA 1/4
UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

DO SOMETHING
WILD:



COLLECT STAMPS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

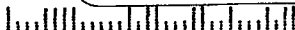
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

LANNETT CO., INC.
9000 STATE ROAD
PHILADELPHIA

PA 19136

071550487

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

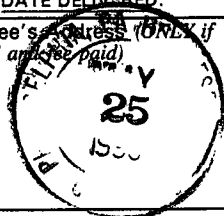
X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)

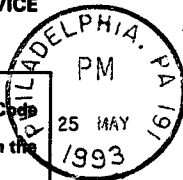


UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LAPP INSULATORS
GILBERT ST
LEROY

NY 14482

4. Article Number

P071550486

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

RDC NY 146 MAY 16:07 DE/24/93 #2

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LAVALLEY BUILDING SUPPLY (PS)
GUILD RD
NEWPORT NH 03773

4. Article Number

P071550485

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☒ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X 

6. Signature — Agent

X

7. Date of Delivery

5-22-93 MG

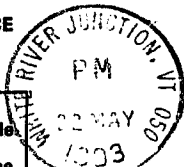
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LEDGEMERE LAND CORP (PS)
290 ELIOT ST
ASHLAND MA 01721

4. Article Number

P071550483

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/83

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

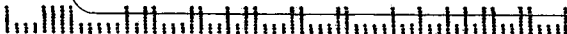
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2, when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LEJEUNE STEEL CO.
118 W. 60TH ST
MINNEAPOLIS

MN 55419

4. Article Number

P071550482

Service:

tered

☐ Insured

led

☐ COD

ss Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



ALWAYS



**PENALTY FOR PRIVATE
USE, \$300**

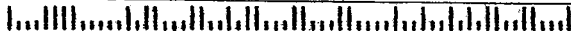
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LELAND ELECTRO SYSTEMS
1200 LAWRENCE PKWAY
ERIE PA 16531

4. Article Number

P071550481

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LEVITON MANUFACTURING
745 JEFFERSON BLVD.
WARWICK

RI 02886

4. Article Number

0071550480

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93 MAY 24 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LEWIS CORP
102 WILLEN BROCK RD
OXFORD

CT 06478

4. Article Number

P071550479

Service:

Registered

☐ Insured

Express

☐ COD

Special Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Shannon Abram*

6. Signature — Agent

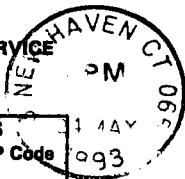
X *[Signature]*

7. Date of Delivery

5/25/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

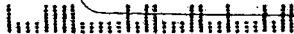
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

LEYBOLD
6500 FLY RD
E. SYRACUSE

NY 13057

P071550478

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN-TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LG INDUSTRIES
WATES WORKS RD
WAGONTOWN

PA 19376

4. Article Number

P071550477

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

for agent and DATE DELIVERED.

5. Signature — Addressee

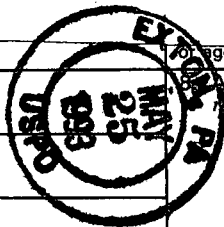
X

6. Signature — Agent

X

7. Date of Delivery

3/25/89



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

LIBRALTER PLASTICS
3175 MARTIN RD
WALLED LAKE

MI 48088

P071550476

Service:

- Registered ☐ Insured
Certified ☐ COD
Priority Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *George J. J. J.*

6. Signature — Agent

X

7. Date of Delivery

5-24-93

AP

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

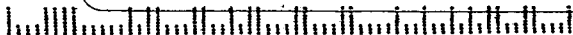
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LLOYD MFG. CO.
130 FRANKLIN ST
WARREN

RI 02885

4. Article Number

0071550475

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4:

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to: 4. Article Number

LOEWENGART & CO, INC.
209 OREGON ST
MERCERSBERG PA 17236

P071550474

- Service:
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X
6. Signature — Agent
X *[Signature]*
7. Date of Delivery
5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

PA 170 6581544 DCR#3 05/24/93 PM

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LOOS & COMPANY, INC
RTE 101
POMFRET

CT 06258

4. Article Number

071550473

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

Rose Keegan

7. Date of Delivery

5/24/93

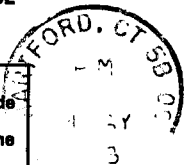
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

LORAL DEFENSE SYSTEMS
600 3RD ST.
NEW YORK

NY 10016

P071550472

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

B. Weiss

6. Signature — Agent

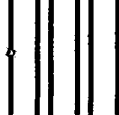
X

7. Date of Delivery

5/21/83

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. **2.** ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

LUCERNE PRODUCTS
7600 OLD EIGHT RD
HUDSON

DH 44236

4. Article Number

071550471

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☒ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Chau Almk*

6. Signature — Agent

X

7. Date of Delivery

5/24/83

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LUMINITE PRODUCTS CORP
115 ROCHESTER ST
SALAMANCA NY 14719

4. Article Number

051550470

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

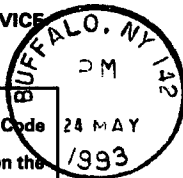
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

LYN CONTRACTING CO.
221 HALLENE RD
WARWICK

RI 02887

P071550469

Service:

- Registered ☐ Insured
Registered Mail ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Judith Schlufer*

6. Signature — Agent

X

7. Date of Delivery

5/24/89

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



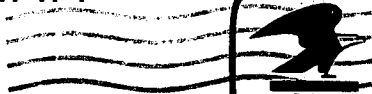
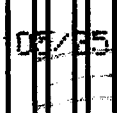
Print Sender's name, address, and ZIP Code in the space below

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



PRDU RI 302904 PM 05/05/93 17:53 #13



**PENALTY FOR PRIVATE
USE, \$300**

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

LYONS TRANSPORTATION
141 EAST 26TH ST
ERIE

PA 16504

071550468

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

MAINE YANKEE ATOMIC POWER
BAILEY'S POINT
WISCASSET ME 04578

4. Article Number

0071550467

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

5. Signature of Addressee

X

6. Signature of Agent

X *Henry Buden*

7. Date of Delivery

5/24/93

tain signature of addressee
or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if
requested and fee paid)

**UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS**

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

NC.-MARBLE SHOP (PS)
N ST
R VT 05765

4. Article Number

P071 550 408

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

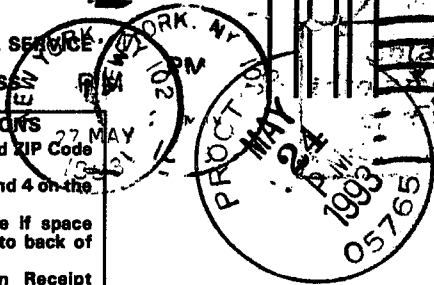
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR
USE, \$

OMYA
61 MA
PROCT

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☒ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Marc Equity Realty Associates
c/o Peter Ruppar, Duke...
2500 Main Place Tower
Buffalo, NY 14202

4a. Article Number

P 353 622 397

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery

4-15-94

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

UNITED STATES POSTAL SERVICE



Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



APR 28 1994

Print your name, address and ZIP Code here

U.S. ENVIRONMENTAL PROTECTION AGENCY

REGION 7

OFFICE OF E. KISSEL

NEW YORK/CARLE

BRANCH

26 FEDERAL ... ROOM 437

NEW YORK, NEW YORK 10278

E. KISSEL

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent from being returned to you. The return receipt fee will provide you the name of the person delivered, the date of delivery. For additional fees the following services are available. Consult postmaster and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

MARCOR OF NEW YORK
120 ELMGROVE PARK
ROCHESTER

NY 14624

4. Article Number

PO715504

Service:

- Registered ☐ Insured
Registered Mail ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-21-91

8. Addressee's Address (ONLY requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

RDC NY 146 ED 39 05/24/93 #4

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN

TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

MARKEL CORPORATION
SCHOOL LANE
BARRISTOWN

PA 19404

4. Article Number

P071 550 465

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

RSEL MIRROR & GLASS PR
101 FOSTER AVE
BROOKLYN NY 11236

4. Article Number

P071550464

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature — Addressee

X

6. Signature — Agent

X Gayne Rhodes

7. Date of Delivery

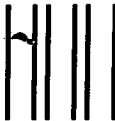
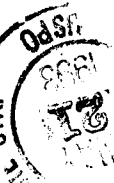
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

RTEC PLASTICS
01 W. THOMPSON RD.
ANTON

MI 48430

P071550463

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt
for Merchandise

ways obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-21-73

8. Addressee's Address (ONLY if
requested and fee paid)

05/24/93

21:17

FLINT MI 485

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

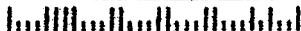
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

P071 550 460

SS. TANK DISPOSAL
BASKIN DR
COPEE

MA 01020

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

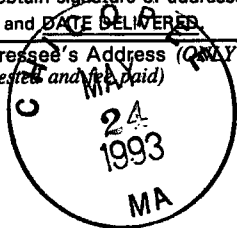
X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

MCKAY PRESS, INC.
215 STATE STREET
MIDLAND

MI 48690

071550455

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

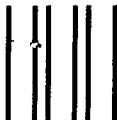
X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



**PENALTY FOR PRIVATE
USE, \$300**

SENDER INSTRUCTIONS

**Print your name, address and ZIP Code
in the space below.**

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

MEAD CORP.
9540 DORCHESTER AVE
CHICAGO

IL 60628

4. Article Number

P071550454

Service:

Insured

☐ Insured

COD

☐ COD

Return Receipt for Merchandise

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/25

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

MENTHOLATUM COMPANY INC
1360 NIAGARA STREET
BUFFALO NY 14213

4. Article Number

0071550452

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X *Lowell J. Merritt*

6. Signature — Agent

X

7. Date of Delivery

5-25

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

MERCHANTS BANK
1860 ERIE BLVD E
SYRACUSE

NY 13221

P071550451

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

TS
5/24/93

8. Addressee's Address (*ONLY if requested and fee paid*)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

MERCURY AIRCRAFT INC
17 WHEELER AVE
HAMMONDSPOORT NY 14840

4. Article Number

0071550450

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

James M. Luripaki

7. Date of Delivery

5/24/93 BF

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

24 MAY 1993

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

05/24/93 18:48

ALWAYS



PENALTY FOR PRIVATE
USE, \$300

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

MERCY HOSPITAL
144 STATE STREET
PORTLAND

ME 04101

4. Article Number

0071550449

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

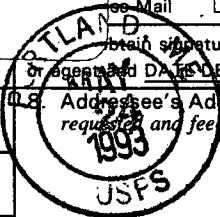
X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

MERIDIAN PRODUCTS
124 EARLAND DRIVE
NEW HOLLAND

PA 17557

0071550448

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

8. Addressee's Address (ONLY if
requested and fee paid)

6. Signature — Agent

X

7. Date of Delivery

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



**PENALTY FOR PRIVATE
USE, \$300**

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

METAL FINISHING TECH.
60 WOOSTER COURT
FORESTVILLE CT 06010

4. Article Number

9071550447

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

METALADE, INC. (PS)
39 COMMERCE DR
ROCHESTER

NY 14623

4. Article Number

PO71550446

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

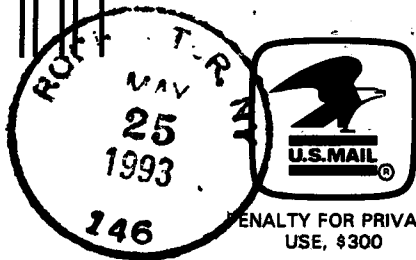
8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

IGAN LIMESTONE
GALCITE RD
RS CITY

MI 49779

4. Article Number

P071 550 444

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X *At Tony Smith (Security)*

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

MIC
103
ROG

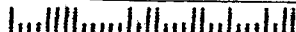
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

HIGAN MAPLE BLOCK CO
BOX 245 STANDISH AVE
OSKY MI 49770

4. Article Number

P071 550 443

Type of Service:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt
for Merchandise |

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

OSS DIV OF PIERCE CO.
SHERWOOD AVE
INGDALE NY 11735

4. Article Number

P071 550 442

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☒ COD
☐ Express Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)

5/24/94
MAY 24 1993

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

IL OIL CORP.
5/HIGHBRIDGE ROAD
ETVILLE NY 13066

4. Article Number

P071550 439

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X *David Nelson*

6. Signature — Agent

X *David Nelson*

7. Date of Delivery

5/22/93

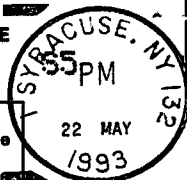
8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



DEFEAT
MUSCULAR DYSTROPHY
SUPPORT M.A.



PENALTY FOR PRIVATE
USE, \$300

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

MONTGOMERY WIRE CO.
LETON INDUSTRIAL PK
LETON NH 03501

4. Article Number

P071550 436

Type of Service:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt
for Merchandise |

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

Stanley R. [Signature]

7. Date of Delivery

5/28/93

8. Addressee's Address (ONLY if
requested and fee paid)

JCT VT 05001 05/25/93 DCR

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

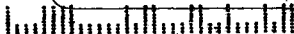
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

MEDICAL DISPOSAL SERVICES
899 FERN HILL RD
WEST CHESTER PA 19380

4. Article Number

PO71550453

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

Signature and DATE DELIVERED.

5. Signature — Addressee

X *Marion Borrett*

6. Signature — Agent

X

7. Date of Delivery

5-27-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

AL SEA PRODUCTS
NER AVE
MOUTH NH 03801

4. Article Number

P071 550 426

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge)
2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

RE'S BOUNTY INC.
ORVILLE DR
MIA

NY 11716

4. Article Number

P071 550 424

Type of Service:

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt for Merchandise |

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-21-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

ted on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

NIAGARA CUTTER SERVICE CENTER
P.O. BOX 279
REYNOLDSVILLE PA 15851

P 353 158 200

Service Type

Registered

☐ Insured

Certified

☐ COD

Express Mail

☐ Return Receipt for Merchandise

Date of Delivery

5-20-93 JCS

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

X Peggy Zarlman

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Is your RETURN A

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



PSN 955

Official Business

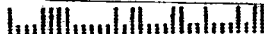
PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



ted on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

P353 158 201

NIAGARA DEVELOPMENT & MFG. CO
3315 HASLEY DRIVE
NIAGARA FALLS NY 14304

Service Type

- ☐ Registered ☐ Insured
- ☐ Certified ☐ COD
- ☐ Express Mail ☐ Return Receipt for Merchandise

Date of Delivery

12/5/2019

5. Signature (Addressee)

Dawn Wagner

6. Signature (Agent)

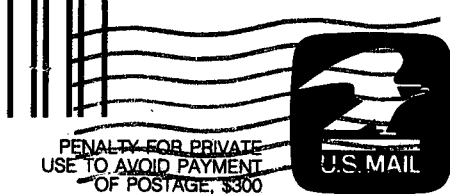
8. Addressee's Address (Only if requested and fee is paid)

Is your RETURN A

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

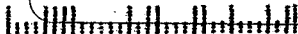
Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300

Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

RA TRANSFORMER CORP.
DALE RD/PO BOX 233
LO NY 14225

4. Article Number

P071 550 421

Type of Service:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt
for Merchandise |

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

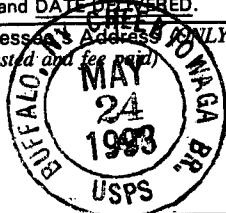
6. Signature — Agent

X

7. Date of Delivery

AT

8. Addressee's Address ONLY if
requested (and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

4. Article Number

PAUL B. ZIMMERMAN
295 WOODCORNER RD
LITITZ

PA 17543

0071550398

Service:

- er ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

Edward M. Oberholzer

6. Signature — Agent

X

7. Date of Delivery

5/23/83

8. Addressee's Address (ONLY if
requested and fee paid)

LANCASTER, PA (176) 05/22/93 DCR #18

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

1 8411



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

SHORE LABS INC.
X 568, 4044 ENDICOTT STRE
DY MA 01960

4. Article Number

P071 550 419

Type of Service:

- | | |
|---------------------------------------|---|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt for Merchandise |

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge)
2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

PASSAIC ENGRAVING CO., INC.
41 BROOK AVE
PASSAIC NJ 07055

P071550399

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Mail

Main signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

MAY 24 1993

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

PAUL B. ZIMMERMAN
295 WOODCORNER RD
LITITZ

PA 17543

4. Article Number

0071550398

Service:

- erred ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Thomas M. Olschaker*

6. Signature — Agent

X

7. Date of Delivery

5/23/83

8. Addressee's Address (ONLY if requested and fee paid)

LANCASTER, PA (176) 05/22/93 DCR #18

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

PEASE A.F.B.
BLDG 93
PEASE AIR FORCE B NH 03803

4. Article Number

0071550397

Service:

- ☐ Insured
☐ COD
☐ Return Receipt
for Merchandise

Obtain signature of addressee

and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

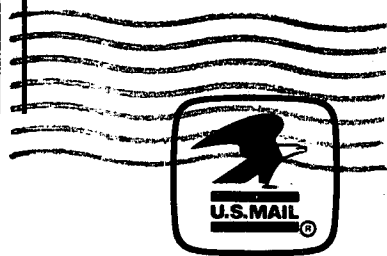
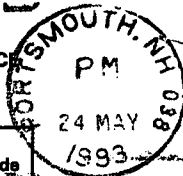
RC

7. Date of Delivery

5-24-57

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

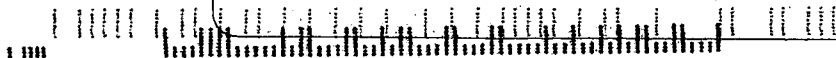
PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

PEERLESS WINSMITH, INC
172 EATON ST
SPRINGVILLE NY 14141

0017550396

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

PENN TANK
237 MC ALEES RD
SEWICKLEY

PA 15143

4. Article Number

P071550395

Service:

- ☒ Registered
☐ Insured
☐ COD
☐ Return Receipt for Merchandise
☐ Registered Mail

Obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

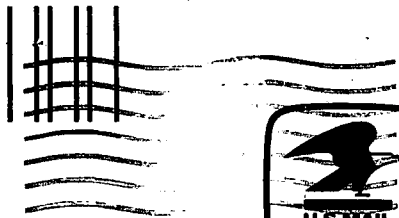
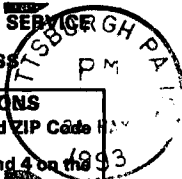
7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code
in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

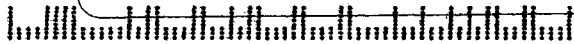
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

P 353 158 203

PENNSYLVANIA PRESSED METALS,
P.O. BOX 271
EMPORIUM PA 15834

Service Type

Insured

☐ Insured

and

☐ COD

Mail

☐ Return Receipt for Merchandise

Delivery

5/20/93

5. Signature (Addressee)

Christ Foster

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business

FLICK #66

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

0000 000



● **SENDER:** Complete items 1 and 2 when additional services are desired, and ~~complete items 3 and 4.~~

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address.
(Extra charge)

2. ☐ Restricted Delivery
(Extra charge)

3. Article Addressed to:

PERRIOGRAPHICS
21800 DORAL RD
WAUKESHA

WI 53186

4. Article Number

PD71550394

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee
and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/83

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

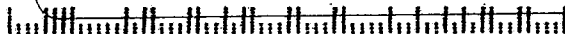
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

PETROLEUM FUEL & TERMI
54 RIVERSIDE AVE
RENSSELAER NY 12144

4. Article Number

P071550393

Service:

- red ☐ Insured
d ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

and **DATE DELIVERED.**

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

PHIL'S SERVICE STATION
RT 9 WEST & WILLOW RD
CORNWALL NY 12518

P071550392

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

PHILADELPHIA RESINS
13 COMMERCE DRIVE
MONTGOMERYVILLE PA 18936

0071550391

Service:

- Registered ☐ Insured
Certified ☐ COD
Express Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED

5. Signature — Addressee

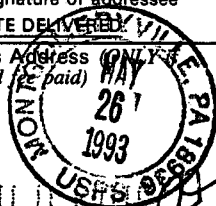
X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to: 4. Article Number

PIONEER PLASTICS		P071550390
ONE PRONITE RD		
AUBURN	ME 04211	
Service:		
Insured		<input type="checkbox"/> Insured
COD		<input type="checkbox"/> COD
Return Receipt for Merchandise		<input type="checkbox"/> Return Receipt for Merchandise
Obtain signature of addressee		
or agent, and <u>DATE DELIVERED.</u>		

5. Signature — Addressee	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent	
7. Date of Delivery	

X *[Signature]*
X *[Signature]*
5/24/93 *M. Hickey*

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

PLAINVILLE ELECTROPLATING CO
21 FORESTVILLE AVE
PLAINVILLE CT 06062

4. Article Number

P071550389

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

01

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

THE PLASTEK GROUP
2310 PITTSBURGH AVE
ERIE

PA 16502

Article Number

PO71550090

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

PLATING FOR ELECTRONICS INC.
94 CALVARY ST
WALTHAM MA 02254

4. Article Number

071550387

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

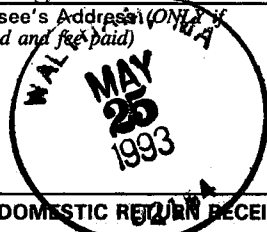
X Cheryl Stascavage

6. Signature — Agent

X

7. Date of Delivery

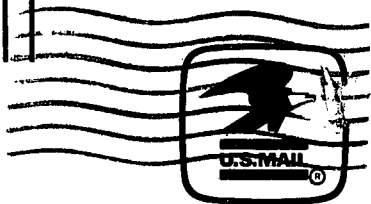
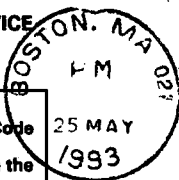
8. Addressee's Address (ONLY if requested and fee paid)



BOSTON, MA. 02205 05/25/93 PM

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

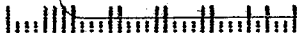
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

PLASTIGLIDE MFG. CORP
105 PROGRESS LANE
WATERBURY CT 06705

4. Article Number

P071550388

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

Jay

8. Addressee's Address (ONLY if requested and fee paid)

5/25

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRE-
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

P071 550 403

T. PRODUCTS
CENTRAL STREET
BOR

ME 04401

Type of Service:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt
for Merchandise |

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X *Sue Coolbert*

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

PLY GEMS
701 NORTH BROADWAY
GLOUCESTER CITY NJ 08030

4. Article Number

P071550386

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

UTION SOLUTIONS
D
STON

VT 05495

4. Article Number

P071 550 385

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO

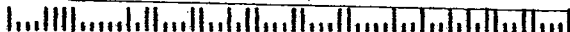


Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

1 0000



d on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

PRINCE RUBBER & PLASTIC CO.
137 ARTHUR STREET
BUFFALO NY 14207

P353 158 204

Service Type

Registered

☐ Insured

Certified

☐ COD

Express Mail

☐ Return Receipt for Merchandise

7. Date of Delivery

5/20

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Is your RETURN AD

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ECTIVE CLOSURES CO, INC
ELMWOOD AVE
ALO NY 14207

4. Article Number

P071 550 375

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-28

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



ad on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

PURE CARBON CO.
EAST SECOND STREET
COUDERSPORT PA 16915

P353 158 206

Service Type

Registered

☐ Insured

Certified

☐ COD

Express Mail

☐ Return Receipt for Merchandise

Date of Delivery

5-20-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Chas Ludwig

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

is your RETURN AD

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USE PA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

Is your RETURN ADDRESS
completed
side?

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

PURULATOR PRODUCTS
3 MIRACLE MILE
ELMIRA

NY 14903

4. Article Number

P071 550 374

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and DATE DELIVERED

5. Signature — Addressee

X

6. Signature — Agent

X

Ken M. Ewen

7. Date of Delivery

MAY 25 1993

8. Addressee's Address *ONLY if*
requested and fee paid



UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

R.E. CHAPIN MANUFACTURING
700 ELLICOTT ST./PO 549
BATAVIA NY 14020

P071550043

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

RALSTON PURINA
3800 MIDDLE RD
DUNKIRK

NY 14048

4. Article Number

PO71550044

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X Vincent C. Sack C.Y. cab

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

RAMAPO-CATSKILL LIBRARY SYSTEM
619 NORTH ST
MIDDLETOWN NY 10940

4. Article Number

P071550045

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Printed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

RANCO INDUSTRIES
600 SINCLAIR BLVD
SINCLAIRVILLE NY 14782

Service Type

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Method of Delivery

5. Signature (Addressee)

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

Is your RETURN ADDRESS printed on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

READING REHAB. HOSPITAL
RD 1 BOX 250
READING PA 19607

P071550046

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

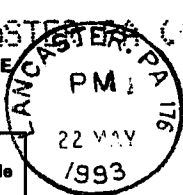
5 22-93

8. Addressee's Address (ONLY if requested and fee paid)

LANCASTER PA 17602 05/22/93 DCR #18

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

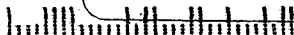
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

REALTY ENGINEERING CO.
56 BLOOMFIELD AVE. PO BOX 622
PINEBROOK NJ 07058

P071550047

Service:

- ered ☐ Insured
ed ☐ COD
ss Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

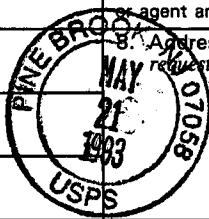
X

6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

ed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional service.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

REDCOM LABORATORIES, INC
1 REDCCOM CENTER
VICTOR NY 14564

4a. Article Number

P353 158 209

Service Type

Registered

☐ Insured

Certified

☐ COD

Express Mail

☐ Return Receipt for Merchandise

Date of Delivery

5-21-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Shane M. Martin

Is your RETURN ADDRESS on the reverse side?

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



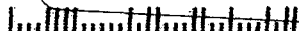
Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA
NEW YORK, NY 10278 ROOM 759
ATTN: MS. SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

RELIABLE METAL FINISHING
3204 16TH STREET
ZION IL 60099

P71550048

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

REMLEY & COMPANY
3816 OAK ORCHARD RD
ALBION NY 14411

P74071550049

Services ☒ ~~SES~~

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

RENNS SERVICE STATION
18 MECHANIC ST
AKRON

NY 14001

P071550050

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED 3

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address (ONLY if requested and fee paid)

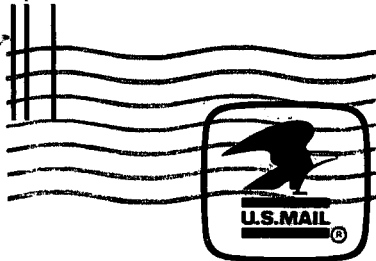
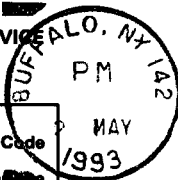
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

RENOLD INC.
BOURNE ST
WESTFIELD

NY 14787

4. Article Number

P071550051

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/22/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

RETAIL PRINTING CORP
50 JOHN HANCOCK RD
TAUNTON

MA 02780

4. Article Number

P071550052

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐
Registered Mail ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X *Joyce Eugenio*

7. Date of Delivery

M. Santos 5/24

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered; date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

RIVERDALE COLOR
153 CLASSEN AVENUE
BROOKLYN

NY 11205

0071550053

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-25

Obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



19:03 JUN 26 1993



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code
in the space below.

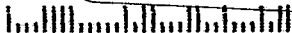
- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ROBERT BOND BUILDERS
CROOKED RD/PO BOX 155
HULLS COVE ME

04644

4. Article Number

P071550054

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
05/22/93 BANGOR, ME 04401-2 MDDR-B 19:26
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

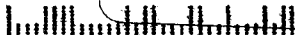
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees check box(es) for additional service(s) requested.

- ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ROBOTRON
21300 W. 8 MILE RD
SOUTHFIELD MI 48086

4. Article Number

P071550056

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

RTI
65 NEWCOMB ST
ATTLEBORO

MA 02703

P071550057

Service:

- Registered ☐ Insured
Registered Mail ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

RYDER TRUCK RENTAL
107 ANDERSON RD
CHEEKTOWAGA

NY

4. Article Number

2071550058

Service:

- Registered ☒ Insured
Registered ☒ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

Agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

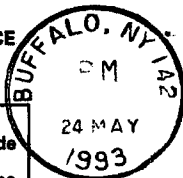
5/04/93

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



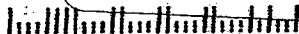
**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

SAEGERTOWN MFG. CORP.
CRAWFORD STREET
SAEGERTOWN

PA 16335

164333

P071550060

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

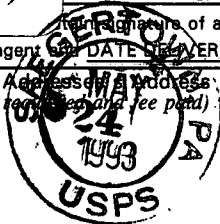
6. Signature Agent

X

Chris Kaelin

7. Date of Delivery

8. Addressee's Address (ONLY if required and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

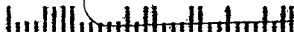
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN-TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

SCANSFORMS, INC.
181 RITTENHOUSE CIRCLE
BRISTOL PA 19007

P071550061

Service:

- ☐ Insured
☐ COD
☐ Return Receipt
☐ Merchandise

Signature of addressee

or agent DATE DELIVERED

5. Signature — Addressee

X

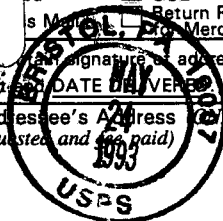
6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address ONLY if requested and fee paid



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



Giant Proportions
Collect Stamps!



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

SCHWEIZER AIRCRAFT CORP
1250 SCHWEIZER RD
BIG FLATS

NY 14814

Article Number

PO71550064

Service:

- Registered ☐ Insured
Certified ☐ COD
Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X
6. Signature — Agent

X Marvin Chamberlain

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

SCRANTON SEWER AUTHORITY
307 N. WASHINGTON AVE
SCRANTON PA 18503

P071550065

Service:

- Registered ☐ Insured
Certified ☐ COD
Express Mail ☐ Return Receipt for Merchandise

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

Obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

SEBAGO, INC
MECHANIC STREET
WESTBROOK

ME 04092

071550066

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

5. Signature — Addressee

X

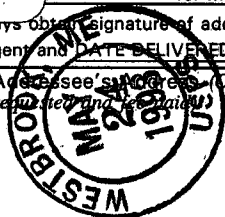
6. Signature — Agent

X

7. Date of Delivery

Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



Begin an Adventure of
Giant Proportions —
Collect Stamps!



**PENALTY FOR PRIVATE
USE, \$300**

SENDER INSTRUCTIONS

Print your name, address and ZIP Code
in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

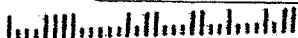
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

SELECT-TRON INDUSTRIES
1946 E. 12TH ST.
ERIE PA 16511

4. Article Number

PO71550067

Service:

- ☐ Insured
☐ COD
☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



ORDER INSTRUCTIONS

Name, address and ZIP Code
below.

Items 1, 2, 3, and 4 on the

front of article if space
otherwise affix to back of

article "Return Receipt
Requested" adjacent to number.



PENALTY FOR
USE

Print Sender's name, address, and ZIP Code in the space below

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Thank you for using
Return Receipt Service.

Is your RETURN ADDRESS
completed on the reverse side?

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number:

SERONOBAKER DIAGNOSTIC
100 CASCADE DRIVE
ALLENTOWN PA 18102

P071550068

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 24 1993

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



LUPDC 180 05/24/93



**PENALTY FOR PRIVATE
USE, \$300**



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. ~~Signature~~ to do this will prevent this card from being returned to you. The return receipt fee will provide you with the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

RD NILES, INC.
NORTH GENESSEE STREET
UR FALLS NY 14865

4. Article Number

P071 550 009

Type of Service:

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

Liz Personius

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

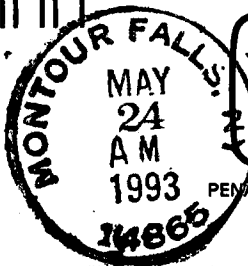
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

Article Number

P353 158 210

Service Type

- Registered ☐ Insured
- Registered ☐ COD
- Registered ☐ Return Receipt for Merchandise

SHURLINE MFG. CO., INC
80 WEST DRULLARD AVENUE
LANCASTER NY 14086

7. Date of Delivery

5-21-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

PS Form 3811, December 1991 ★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

ARVEY'S
EAST MINEOLA AVENUE
Y STREAM NY 11580

4. Article Number

P071 550 070

Type of Service:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt
for Merchandise |

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

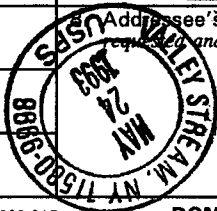
X

6. Signature — Agent

X

7. Date of Delivery

Addressee's Address (ONLY if
requested and fee paid)



UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

PUMP
INDUSTRIAL BLVD/PO BOX 460
ISLAND NY 14072

4. Article Number

P071 550 072

Type of Service:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt
for Merchandise |

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

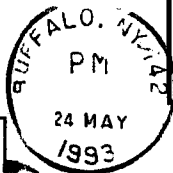
8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

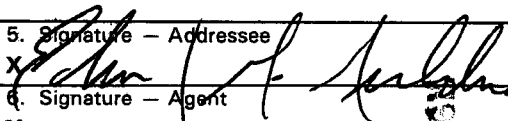
SONOCO FIBRE DRUM (B)
720 LAUREL ST.
READING PA 19602

0071550076

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

5. Signature — Addressee

X 

6. Signature — Agent

X

7. Date of Delivery

Obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



**PENALTY FOR PRIVATE
USE, \$300**

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

S.E. MORRIS COUNTY MUNI
101 WESTERN AVE.
MORRISTOWN NJ 07960

0071550059

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5/20

MAY 21 1989

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will be provided on the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

SPECIALIZED PLATING
15 WARD HILL AVENUE
HAVERHILL MA 01835

4. Article Number

9071550078

Service:

- Registered ☐ Insured
Certified Mail ☐ COD
Special Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED. 5-13

5. Signature — Addressee

X *James R. ...*

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

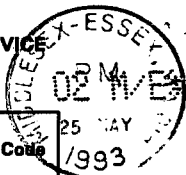
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

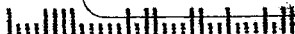
ATTN: SUZANNE BECKER



02 MAY 25 1993 PM 05/25/93 PM



**PENALTY FOR PRIVATE
USE, \$300**



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

ST. JOHNSBURY TRUCKING
442 HOLLYWOOD AVE
S. PLAINFIELD NJ 07080

4. Article Number

P071550079

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

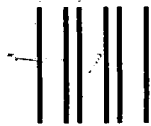
X

7. Date of Delivery

CS 5/21/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

ST. MARY'S METAL FINISHING
TROUT RUN ROAD
ST. MARY'S PA 15057

Article Number

P353 158 211

Service Type

Registered

☐ Insured

Certified

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

7. Date of Delivery

5-20-93

8. Addressee's Address (Only if requested and fee is paid)

5. Signature (Addressee)

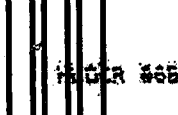
Charlie Ott

6. Signature (Agent)

Is your RETURN ADDRESS on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

STATURE MACHINE TECHNO
23647 RYAN ROAD
WARREN

MI 48091

P071550080

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

REFINING AND MARKET (B)
RIVER RD
ANDA NY 14150

4. Article Number

P071 550 091

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature Addressee

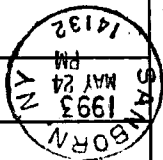
X

6. Signature - Agent

X

7. Date of Delivery

5.22.93



8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

THERMATRU CORP.
108 MUTZFELD RD
BUTLER

IN 46721

4. Article Number

P071550092

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

tain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

DLP

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Thomas Hayes, Esq.
Commandant (G-LCL)
United States Coast Guard
2100 2nd Street, S.W.
Washington, DC 20593-0001

4a. Article Number

P 752 210 252

4b. Service Type

- | | |
|---|---|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input checked="" type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt for Merchandise |

7. Date of Delivery

APR 19 1994

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

CWO B.L. ZELNER. G-CAS-2. 267-0051

UNITED STATES POSTAL SERVICE



Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



APR 26 1994

Print your name, address and ZIP Code here

U.S. ENVIRONMENTAL PROTECTION AGENCY
REGION II
OFFICE OF REGIONAL COUNSEL
NEW YORK/CARIBBEAN SUPERFUND BRANCH
26 FEDERAL PLAZA — ROOM 437
NEW YORK, NEW YORK 10278

EKissel

● **SENDER:** Complete items 1 and 2, when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

THREE DIMENSIONAL CORP
ONE SOUTHSIDE RD.
DANVERS

MA 02176

4. Article Number

P071550093

Service:

- Registered ☐ Insured
Certified ☐ COD
Special Mail ☐ Return Receipt
for Merchandise

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X *Paul Beaulieu*

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

TIBBETS INDUSTRY
30 COLCORD AVE
CAMDEN

ME 048..

071550095

Service:

- tered ☐ Insured
ied ☐ COD
ss ☐ Return Receipt
for Merchandise

Obtain signature of addressee
or agent and **DATE DELIVERED.**

5. Signature — Addressee

X

8. Addressee's Address (ONLY if
requested and fee paid)

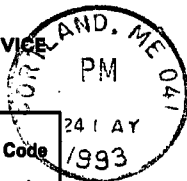
6. Signature — Agent

C. Wood

7. Date of Delivery

5/24/93

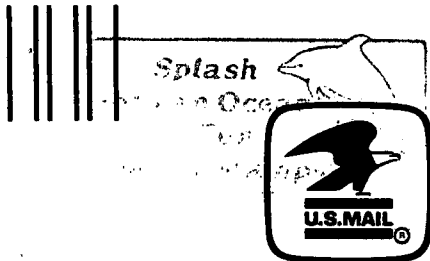
UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

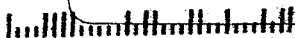
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

TIGHE BOND CORPORATION (PS)
53 S. HAMPTON RD
WESTFIELD MA 01085

9071550097

Service:

- ☐ Registered ☐ Insured
☐ Certified Mail ☐ COD
☐ Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

8. Addressee's Address (ONLY if requested and fee paid)

6. Signature — Agent

X *Oliver Jackson*

7. Date of Delivery

5/04/93

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

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- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

TIVOLY, U.S.A.
BAXTER AVE.
DERBY LINE

VT 05830

4. Article Number

PO71550098

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

7. Date of Delivery

5-22-93

8. Addressee's Address (ONLY if requested and fee paid)

WHITE RIVER JCT VT 05001

05/22/93 DCR2

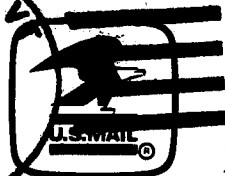
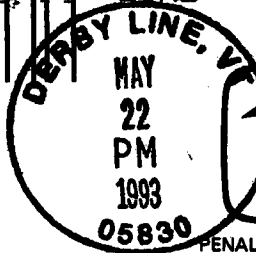
UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

**RETURN
TO**

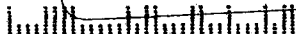


Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

1 111



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

TNT & ASSOCIATES
840 REYNOLDS AVE
COLUMBUS

OH 43201

4. Article Number

PO71550100

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

NEW YORK NY 100 05/27/93 03:49 DC448

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

TODCO CORP
RTE 353
CATTARAUGUS

NY 14719

PO71550101

Service:

- Registered ☐ Insured
Certified ☐ COD
Express Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Babone Tony*

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

TOWN OF N. TONAWANDA
758 ERIE AVENUE
N. TONAWANDA

NY 14120

4. Article Number

0071550103

Service:

Registered



Insured

and



COD

Special Mail



Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X *Mike D...*

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



ALWAYS
USE ZIP CODE



PENALTY FOR PRIVATE
USE, \$300

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

TRANS TECH ELECTRONICS
E. WILLIAMS ST
WYOMING

IL 61491

4. Article Number

PO71550104

Service:

Registered

☐ Insured

Registered

☐ COD

Registered Mail

☐ Return Receipt
for Merchandise

Obtain signature of addressee

and DATE DELIVERED.

5. Signature - Addressee

X *[Signature]*

6. Signature - Agent

X *[Signature]*

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

TRENCH COMPANY, INC.
1298 MAIN ST
BUFFALO

NY 14201

4. Article Number

0071550106

Service:

- Registered ☐ Insured
Certified Mail ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Signature of addressee

Signature of agent and DATE DELIVERED.

5. Signature — Addressee

X *Morris Hunt*

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to: 4. Article Number

TRI CAN SYSTEMS 12828 S. RIDGEWAY AVE ALSIP IL 60658		P071550108
		Service:
		<input type="checkbox"/> Insured
		<input type="checkbox"/> COD
		<input type="checkbox"/> Return Receipt for Merchandise
		Obtain signature of addressee or agent and <u>DATE DELIVERED.</u>

5. Signature — Addressee

6. Signature — Agent

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

TRICO PRODUCTS
817 WASHINGTON STREET
BUFFALO NY

142

P071550109

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X S. M. Haynes

6. Signature - Agent

X

7. Date of Delivery

MAY 25 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired; and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

TRIFARI
RI KRUSSMAN EISCHEL, INC
PAWTUCKET AVENUE
VIDENCE RI 02915
TRIFARI
3400
E. PRO

4. Article Number

P071550112

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

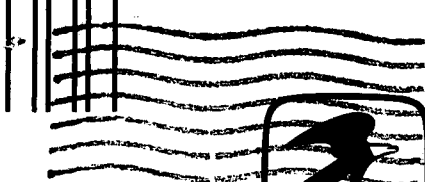
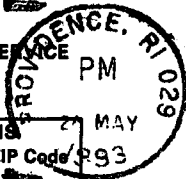
X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

ed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

TROPEL, INC.
60 O'CONNOR ROAD
FAIRPORT NY 14450

Service Type

- Registered ☐ Insured
Certified ☐ COD
Express Mail ☐ Return Receipt for Merchandise

Date of Delivery

5-20-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

N. Carol Thomas

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

RDC NY 146 21 12 15/20/93 #2

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

UTICA METAL PRODUCTS, INC.
1526 LINCOLN AVENUE
UTICA NY 13502

Article Number

P353 158 217

Service Type

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

7. Date of Delivery

5/20/93

8. Addressee's Address (Only if requested and fee is paid)

5. Signature (Addressee)

6. Signature (Agent)

Is your RETURN ADDRESS

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



Official Business

**PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300**



Print your name, address and ZIP Code here

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: MS. SUZANNE BECKER

on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

2. Article Addressed to:

4a. Article Number

VAL-KRO, INC.
369 RIVER ROAD
N. TONAWANDA NY 14120

P353 158 214

Service Type

Registered

☐ Insured

Certified

☐ COD

Express Mail

☐ Return Receipt for Merchandise

7. Date of Delivery.

5-20

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

Kathleen A. Reitz

PS Form 3811, December 1991 ☆U.S. GPO: 1992-323-402

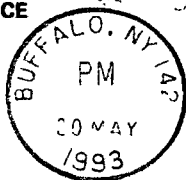
DOMESTIC RETURN RECEIPT

Is your RETURN ADDRESS on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

VIBROPLATING
353 CANAL DR
BENSALEM

PA 19020

071550115

Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

NEW YORK NY 100 05/27/93 03:20 DCE#8

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



Is your RETURN ADDRESS on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

TURBODYNE DIVISION
 DRES IND 37 COATS STREET
 WELLSVILLE NY 14895

P353 158 218

Service Type

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Date of Delivery

5/20/93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE Y. 149 05/20/93 16:53



Official Business

PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery
(Extra charge) (Extra charge)

3. Article Addressed to:

GENERAL SERVICES (PS)
STATE ST
HESTER NY 14614

4. Article Number

P071 550 116

Type of Service:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Certified | <input type="checkbox"/> COD |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Return Receipt
for Merchandise |

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X *Steve J. M. Ellis*

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if
requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

VILLAGE OF WESTFIELD
42 ENGLISH ST
WESTFIELD

NY 14787

4. Article Number

0071550117

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature - Addressee

X Village of Westfield

6. Signature - Agent

X Milene S. Labens

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

Is your RETURN AD on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

W. R. CASE & SONS CUTLERY CO
OWENS WAY (S. BRADFORD)
BRADFORD PA 16701

Service Type

Registered

Insured

Postage Mail

☐ Insured

☐ COD

☐ Return Receipt for Merchandise

7. Date of Delivery

20
1993

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

PA

6. Signature (Agent)

Tim Burt

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Is your RETURN AD on the reverse side?

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

WALLENPACK N. ELEM SCHOOL
HD6, BOX 6070
HAWLEY PA 18428

P071550120

Service:

- ered ☐ Insured
ed ☐ COD
s Mail ☐ Return Receipt
for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

8. Addressee's Address (ONLY if requested and fee paid)

6. Signature — Agent

X Ann M. Pichon

7. Date of Delivery

5-24-93

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SCRANTON PA 185 11 MAR 24 1993 PM 18428

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

WATERVLIET ARSENAL
SARNOV-EHQ
WATERVLIET

NY 12189

P071550121

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5/24/93

Obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

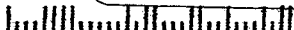
**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



- **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address: (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

WCA HOSPITAL
207 FOOTE AVE
JAMESTOWN

NY 14701

4. Article Number

0071550122

Service:

- Registered ☐ Insured
Certified ☐ COD
Express Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

MAY 22 1993

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

**USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278**

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

WEBASTO SUNROOF, INC.
2700 PRODUCT DRIVE
ROCHESTER HILLS MI 48367

Article Number

P071550125

Service:

- Registered ☐ Insured
Certified ☐ COD
First-Class Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature — Addressee

X

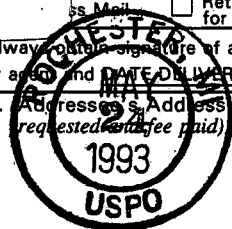
6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

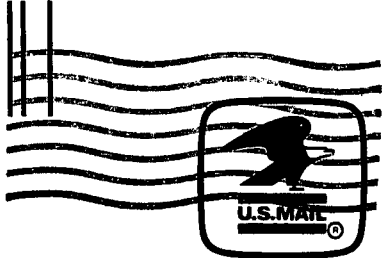
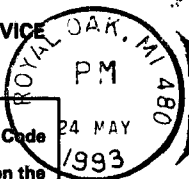


UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

WESTBORD FIELD HDQTRS (PS)
ROUTE 135
WESTBORD MA 01581

071550107

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

8. Addressee's Address (ONLY if requested and fee paid)

6. Signature — Agent

X

7. Date of Delivery

P. McNamara
5/24/93

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

WESTERN MAINE GRAPHICS
1 MADISON AVE., PO BOX 153
NORWAY ME 04268

4. Article Number

0071550128

Service:

- Registered ☒ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

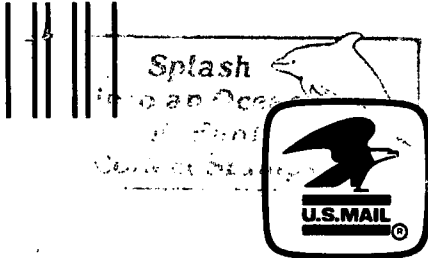
X

7. Date of Delivery

5/24/93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

WESTINGHOUSE ELECTRIC CORP
RTS 30 & 31
BEDFORD PA 15522

4. Article Number

P071550130

Service:

- Registered ☐ Insured
Registered ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

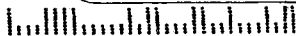
RETURN
TO



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

WEYERHAUSER CO.
100 HAWKES STREET
WESTBROOK

ME 04092

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

Obtain signature of addressee

or agent, and DATE DELIVERED.

5. Signature — Addressee

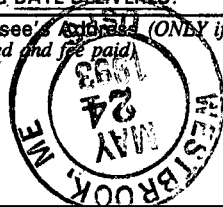
X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)



UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

WILKESBARRE CITIZENS
75 N. WASHINGTON ST
WILKESBARRE

PA 18711

4. Article Number

0071550134

Service:

- ☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Obtain signature of addressee

and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

MAY 24 1993

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered; date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

WILSON GREATBATCH LTD
10,000 WEHRLE DRIVE
CLARENCE NY

14031

4. Article Number

9071550135

Service:

Registered

☐ Insured

Insured

☐ COD

Registered Mail

☐ Return Receipt for Merchandise

5. Signature — Addressee

X 

6. Signature — Agent

X

7. Date of Delivery

KA 5-24-93

Obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

WOLF PRINTING
310 NEWINGTON RD
W. HARTFORD

CT 06110

4. Article Number

0071550139

Service:

- Registered ☐ Insured
Registered Mail ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

X

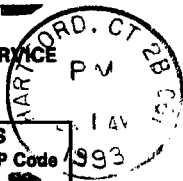
6. Signature - Agent

X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



**PENALTY FOR PRIVATE
USE, \$300**

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278
ATTN: SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

XERXES CORPORATION
RTE 2, BOX 1060
WILLIAMSPORT

MD 21795

4. Article Number

9071550140

Service:

- Insured ☐
COD ☐
Return Receipt for Merchandise ☐

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

X Jennifer L. Horn

6. Signature - Agent

X

7. Date of Delivery

5-25-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

4. Article Number

YORK RAKES
PO BOX 488
UNADILLA

NY 13849

P071550142

Service:

- Registered ☐ Insured
Insured ☐ COD
Registered Mail ☐ Return Receipt for Merchandise

Obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X 

7. Date of Delivery

- 5-24-93

8. Addressee's Address (ONLY if requested and fee paid)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS



SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
 - ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

4a. Article Number

ZIPPO MFG. CO.
CONGRESS STREET PLANT
BRADFORD PA

1670

P353 158 216

Service Type

Registered

☐ Insured

Insured

☐ COD

Business Mail

☒ Return Receipt for Merchandise

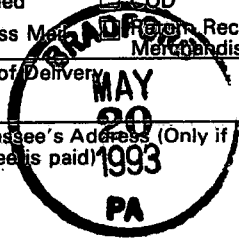
7. Date of Delivery

5. Signature (Addressee)

Ron Baer

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)



Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

Official Business



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

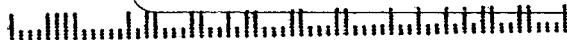
PENALTY FOR PRIVATE
USE TO AVOID PAYMENT
OF POSTAGE, \$300



Print your name, address and ZIP Code here

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: MS. SUZANNE BECKER



● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

LITE CO., INC.
ELMWOOD AVENUE
NY 14733

4. Article Number

P071 550 113

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

X

6. Signature — Agent

X

7. Date of Delivery

5-23-93

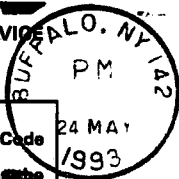
8. Addressee's Address (*ONLY if requested and fee paid*)

UNITED STATES POSTAL SERVICE
OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete Items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE
USE, \$300**

**RETURN
TO**



Print Sender's name, address, and ZIP Code in the space below.

USEPA
26 FEDERAL PLAZA ROOM 759
NEW YORK, NY 10278

ATTN: SUZANNE BECKER

